

# Application For a Driving Instructor's Permit \*New/Renewal

Land Transport (Driver) Regulation 2000 (Regulation 40)



Two recent identical Passport size photograph of the applicant should be attached	Full Name of Applicant: *Mr/Mrs/Miss: _____ Fathers Name: _____ Residential Address: _____ Postal Address: _____ _____ Tax Identification No: _____ Email Address: _____ FNPF No: _____
Phone Contact(B): _____ (M) _____ Previous Address (if any) _____	Date of Birth: _____ Place of Birth: _____
Class(s) of vehicles for which an instructor's permit is required: _____	
Have you ever had your driving licence endorsed, suspended or cancelled? *YES/NO. If YES give particulars, including Year in which Licence was cancelled or suspended _____ _____ _____	
Grounds for revocation/cancellation of the Driving Licence: _____	
Have you ever been convicted of any offence against traffic laws? _____ *YES/NO. If YES, give details of the offence and details of conviction. _____ _____	

**DECLARATION**

I declare the above details for a driving instructor's permit are completed and correct.

I hereby state that to the best of my knowledge and belief:

- (i) My hearing, sight (with glasses if necessary) and heart are normal
- (ii) I am not subject to epilepsy, fits, dizziness or fainting bouts
- (iii) I do not suffer from rheumatism in the limbs so as to affect my driving capabilities
- (iv) I am not aware that I have any physical or mental disability or infirmity such as is likely to affect my efficiency as the driver of a motor vehicle

I enclose my current driving licence (if applying for a renewal) and my current instructor's permit I have held a driving licence for \_\_\_\_\_ years

Drivers Licence No \_\_\_\_\_ R.R.No: \_\_\_\_\_ of \_\_\_\_\_

I enclose the following fee: - Application \$ \_\_\_\_\_  
 - Police Vetting \$ \_\_\_\_\_  
 (If applicable)

I enclose a certificate of character made by a person, not related to me, who has known me for at least 5 years

\_\_\_\_\_ Date \_\_\_\_\_ Applicants Signature \_\_\_\_\_

Decision of the Authority Approved/Refused

\_\_\_\_\_ Chief Executive Officer \_\_\_\_\_ Date \_\_\_\_\_