

FORM – 8

[See Rule 17(1)]

Application for the Addition of a new Class of Vehicle to a Driving License

To.

The Licensing Authority,

... ..

I, Shri / Smti. / Kumari

hereby apply for the addition of the following class / classes of Motor Vehicle to the attached license:-

- (a) Motor Cycle without Gear
- (b) Motor Cycle with Gear
- (c) Invalid Carriages
- (d) Light motor vehicle
- (e) Medium goods vehicles
- (f) Medium passengers motor Vehicles
- (g) Heavy Goods Vehicles
- (h) Heavy passengers motor vehicles
- (i) Road Rollers
- (j) Motor vehicle of the following description

I enclose

- (a) A Medical Certificate in Form 1
- (b) Learner's in Form 3
- (c) Driving License in Form 6 / 7
- (d) Driving Certificate in Form 5 if the
application is to drive a transport vehicles
- (e) I have paid the fee of rupees

Date 200

Signature or thumb impression of
the applicant

Certificate of test of competence to drive.

The applicant has passed / failed in the test specified in Rule 15 of the Central Motor Vehicles Rules 1989. The test was conducted on a (here enter description of vehicle) on date

Signature of Testing Authority,
Name and Designation

as a driver? If so, give your reason in details.

Optional

(g) (a) Blood group of the applicant (if the applicant so desires that the information may be noted in his driving license).

(b) RH factor of the applicant (if the applicant so desires that the information may be noted in his driving license).

Declaration made by the applicant in Form I as to his physical fitness is attached.

[Certificate of Medical Fitness

I certify that :

- (i) I have personally examined the applicant Shri / Smti / Kum
- (ii) that while examining the applicant I have directed special attention to his / her distant vision;
- (iii) while examining the applicant, I have directed special attention to his / her hearing ability, the condition of the arms, legs, hands and joints of both extremities of the applicant; and
- (iv) I have personally examined the applicant for reaction time, side vision and glare recovery, (applicable in case of persons applying for a license to drive goods carriage carrying goods of dangerous or hazardous nature to human life.

And, therefore, I certify that, to the best of my judgement, he is medically fit / not fit to hold a driving license].

The applicant is not medically fit to hold a license for the following reasons;

Signature

- 1. Name and designation of the Medical Officer / practitioner

(Seal)

- 2. Registration number of medical officer

Date

Signature or thumb impression of the candidate

1. Inc. by G. S. R. 221(E), dated, 28th March, 2001 (w.e.f. 28-3-2001).

NOTE :- The medical officer shall affix his signature over the photograph affixed in such a manner that part of his signature is upon the photograph and part on the certificate.

