APPLICATIONS FOR A DRIVING LICENCE AND ADDITION OF A NEW
CLASS OF VEHICLE TO A DRIVING LICENCE
(For Indian citizen)

PART- I.

FORM 2
[See Rule 10]
FORM OF APPLICATION FOR THE GRANT OF LERNER’S LICENCE

To
The Licensing Authority,..............................................

I hereby apply for a license authorizing me to drive as a learner,
the following motor vehicle(s)

(a) Motor cycle without gear □ (b) Motor cycle with gear □ (c) Invalid carriage □
(d) Light motor vehicle □ (e) Road roller □ (f) Three wheeler □ (g) Excavator □
(h) Mobile crane □ (i) Tractor □ (j) MPMV □ (k) MGV □ (l) HPV □ (m) HGV □
(n) Motor vehicle of the following description

.................................................................

…………….………………
Specimen Signature

PARTICULARS TO BE FURNISHED BY APPLICANT
(To be filled in Capital Letters)

1. Full name of the applicant: 

2. Son/ Daughter /Wife of :

3. Permanent Address :

   Pin code

4. Temporary Address/ Present Address/ Official Address (if any)

   Pin code

5. Duration of Stay at the present address:

   : From

6. Date of birth :
7. Place of birth :  

DD  MM  YY

8. If place of birth outside India,-
when migrated to India :  

DD  MM  YY

9. Educational qualifications :  


10. Identification marks (i)………………………………………………………………..
     (ii)………………………………………………………………...

11. Declaration of citizenship status;………………………………………………………

12. Blood group – RH (Rhesus) factor :…………………………………………………..

13. I hold an effective driving license to drive:
     (a) Motor cycle without gear  
        w.e.f.……………..
     (b) Motor cycle with gear  
        w.e.f.……………..
     (c) Light Motor Vehicle  
        w.e.f.……………..
     (d) Three wheeler  
        w.e.f.……………..
     (e) Road roller  
        w.e.f.……………..
     (g) Excavator  
        w.e.f.……………..
     (h) Mobile crane  
        w.e.f.……………..
     (i) Tractor  
        w.e.f.……………..
     (j)……………………………………w.e.f ……………………….

Driving Licence No:…………………………

14. Whether any driving license previously held
by applicant was cancelled and if so,
for what reason;  


15. Have you been disqualified for holding or obtaining
   Driving license or learners license. If so, for what
   reasons


16. I have paid the fee of Rs…………………………

Date……………………… Signature or thumb impression of Applicant

PART-II

DECLARATION FOR APPLICANT SEEKING DRIVING LICENCE FOR MOTOR CYCLE
WITH ENGINE CAPACITY NOT EXCEEDING 50.CC [UNDER SUB SECTION (2) OF
SECTION 7 OF MV ACT 1988]

Shri/Kumari…………………………………………. son/daughter of…………………
who is a minor is under my care and accept responsibility for his/her driving. If at a
later date I decide not to accept responsibility for his/her driving I shall intimate the
Licencing Authority in writing for the cancellation of the licence. I give my consent for
his/her obtaining learners licence.

Signature………………………………

Name and full address of the parent/guardian…………………………………………
…………………………………………………………Relationship……………………
For Office use

(1) Since, the applicant is exempted from the medical test under Rule 6 and the preliminary test under Rule 11 (2) of the Central Motor Vehicles Rules 1989. 

*Learner’s license is issued.*

(2) Since the applicant is exempted from the preliminary test under Rule 11 (2) of the Central Motor Vehicles Rule 1989.

*Learner’s license is issued.*

(3) The Applicant was tested with reference to Rule 11 (1) of the Central Motor Vehicles Rules 1989 in CALLS at RTO/Sub RTO, ……………………………

He has passed the test.

Learner’s license is issued.

(4) He has failed in the test conducted in CALLS at RTO/Sub RTO,………………

Signature of Licensing Authority/
Addl./Asst: Licensing Authority.

---

**FORM 1**

[See Rule 5 (2)]

**PART-III**

APPLICATION- CUM-DECLARATION AS TO PHYSICAL FITNESS

Declaration

(a) Do you suffer from epilepsy or from sudden attacks of loss of consciousness or giddiness from any cause? Yes/No

(b) Are you able to distinguish with each eye at a distance of 25 meters in good day light (with glasses, if worn) a motor car number plate Yes/No

(c) Have you lost either hand or foot or are you suffering from any defect of muscular power of wither arm or leg? Yes/No

(d) Can you readily distinguish the pigmentary colours, red and green? Yes/No

(e) Do you suffer from night blindness? Yes/No

(f) Are you so deaf so as to be unable to hear (and if the application is for driving a light motor vehicle, with or without hearing aid) the ordinary sound signal? Yes/No

(g) Do you suffer from any other disease or disability likely to cause your driving of a motor vehicle to be a source of danger to the public, if so, give details. Yes/No

I hereby declare that, to the best of my knowledge and belief, the particulars given above and the declaration made therein are true.

(Signature or thumb impression of the Applicant)

Note: (1) An applicant who answers “Yes” to any of the questions (a),(c),(e),(f) and (g) or “No” to either of the questions (b) and (d) should amplify his answers with full particulars, and may be required to give further information relating thereto.

---

**PART- IV**

**FORM 1A**

[See Rules 5 (1), (3), 7, 10(a), 14 (d) and 18 (d)]

Space for Passport size Photograph
**MEDICAL CERTIFICATE**

(To be filled in by Registered Medical Practitioner)

[To be filled in by a registered medical practitioner appointed for the purpose by the State Government or person authorized in this behalf by the State Government referred to under sub-section (3) of Section 8.]

1. Name of the applicant: [ ]

   (a) Does the applicant, to the best of your judgment, suffer from any defect of vision, If so, has it been corrected by suitable spectacles. Yes/No

   (b) Can the applicant, to the best of your judgment, readily distinguish the pigmentary colours, red and green? Yes/No

   (c) In your opinion, is he able to distinguish with his eyesight at a distance of 25 meters in good day light a motor car number plate? Yes/No

   (d) In your opinion, does the applicant suffer from a degree of deafness which would prevent his hearing the ordinary sound signs? Yes/No

   (e) In your opinion, does the applicant suffer from night blindness? Yes/No

   (f) Has the applicant any defect or deformity or loss of member which would interfere with the efficient performance of his duties as a driver? If so, give your reasons in detail.

(Certificate of Medical Fitness)

I certify that:-

   (i) I have personally examined the applicant Shri/Smt/Kumari…………………………

   (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.

And, therefore, I certify that, to the best of my judgment, 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:

Name and designation & Registration number of the Medical Officer/Practitioner (seal)

Date:

Note: [(1) 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].
PART- V.  CERTIFICATE FOR VISUAL STANDARDS FOR DRIVING
(To be filled in by Registered Ophthalmology)

I have examined Shri/Smt ____________________________
Aged ____________________________

and his/her visual standards are as follows:

Photograph of the candidate
(To be signed upon by the Ophthalmologist)

1. Visual Acuity

<table>
<thead>
<tr>
<th>Visual Acuity</th>
<th>A Unaided</th>
<th>B. Corrected</th>
<th>Sph</th>
<th>Cyl</th>
<th>Axis</th>
<th>C. Binocular Corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>RE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

II Night blindness ..........................................................
III Squint .................................................................
IV Field (Degrees) Horizontal ......................... Vertical ...........
V Fundus ........................................ RE .................... LE ............

Any other significant ocular morbidity ..............................

Candidates is Fit □/ Unfit □ to drive a Category I/II vehicle.

Unfit due to criteria .......................................................... mentioned above.

(Category –I means Non Transport Vehicles which include Motor Cycles, Motor Cars, etc. specified as such in Central Government Notification No.S.O.1248(E) dated 5th November 2004 as non-transport vehicles)

(Category-II means transport vehicles which include Autorikshaws, Taxis, Stage carriages, Contract carriages, Goods carriages, Private Vehicles etc. specified as such in the said Notification.)

Signature of the candidate:
Place:
Date: Signature of Ophthalmologist.

(Seal.)
PART- VI

FORM 4
[ See Rule 14(1)]
FORM OF APPLICATION FOR LICENSE TO DRIVE A MOTOR VEHICLE
[ Additional details which are not included in Form-2 ]

To
The Licensing authority,………………………………………………………………..

I apply for a license to enable me to drive vehicles of the following description:-

(a) Motor cycle without gear ☐ (b) Motor cycle with gear ☐ (c) Invalid carriage ☐
(d) Light motor vehicle ☐ (e) Road roller ☐ (f) Three wheeler ☐ (g) Excavator ☐
(h) Mobile crane ☐ (i) Tractor ☐ (j) Motor vehicle of the following description
…………………………………………………………………………………………

PARTICULARS TO BE FURNISHED BY THE APPLICANT

(1) Particulars and date of every conviction
    which has been ordered to be endorsed
    on any license held by the applicant : …………………………………

(2) Have you been subjected to a driving test as to your fitness or ability to drive a
    vehicle in respect of which a license to drive is applied for? If so, give the following
details:-

<table>
<thead>
<tr>
<th>Date of test</th>
<th>Testing authority</th>
<th>Results of test</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. I enclose the learners license No…………………………dated………………
   issued by licensing authority……………………………………………………

4. I enclose driving certificate dated…………………issued by………………………
   ……………………………………………………………………………………
   (Name and address of the driving school)

Date:……………… Signature/Thumb impression of Applicant.
PART-VII

FORM 8
[See Rule 17 (1)]

APPLICATION FOR THE ADDITION OF A NEW CLASS OF VEHICLE TO A DRIVING LICENCE

To

The Licensing authority,…………………………………………

I, Shri/smt./Kumari……………………………………………………………..hereby apply for the addition of the following class/ classes of motor vehicles to the attached licence:-

Description

Non Transport motor vehicle:

(a) Motor cycle without gear □ (b) Motor cycle with gear □ (c) Invalid carriage □

d) Light motor vehicle □ (e )Road roller □ (f) Three wheeler □ (g) Excavator □

(h) Mobile crane □ (i) Tractor □ (j) MPMV □ (k) MGV □ (l) HPV □ (m) HGV □

(n) Motor vehicle of the following description
…………………………………………………………………………………………...

I enclose,

(a) Learner’s licence in Form 3

(b) Driving Licence in Form 6/7

(c) Driving Certificate in Form 5

Date:………………………….                                         Signature or thumb impression

of the applicant.
**PART VIII.** CERTIFICATE OF TEST OF COMPETENCE TO DRIVE.
(To be filled in by the Testing Officer)

**TEST SHEET**

**PART I-GROUND TEST**

Name of the candidate : 

Testing ground: 

Date of test: 

Certified that the ground test was conducted by me and the candidate found fit for road test in **Motor cycle without gear** / **Motor cycle with gear** / **Three Wheeler** / **Light Motor Vehicle**.

Signature of candidate: 
Signature, Name and designation of Testing Officer.

**PART II – ROAD TEST**
(Check List)

Write ‘Yes’ or ‘No’ against each item

<table>
<thead>
<tr>
<th>Sl.</th>
<th>M/cy/HPV</th>
<th>LMV</th>
<th>3Wheeler/HGV</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Adjusting rear-view mirror</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Precautions before starting the engine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Moving straight ahead engaging all gears</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>To change to lower gears from the top gear</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Stop and re-start the vehicle on an upward incline making proper use of the hand brake/throttle/foot brake</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Turn right and left corners correctly and take proper use of rear-view mirror before signaling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Overtake and allow to be overtaken and take appropriate course of the road with proper caution giving appropriate signals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Give appropriate signals by hand and by electrical indicators</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Stop the vehicle, and bring it to rest at an appropriate course on the road</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>In the case of vehicles having a reverse gear, driving the vehicle backwards, either to the right or left</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Take action on the signals given by traffic signs, traffic lights, traffic policemen and other road</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
12. Act correctly at pedestrian crossing which is not regulated by traffic light or traffic policemen, by giving preference to persons crossing the road

13. Keeping to the left in normal driving

14. Regulate speed to suit varying road and traffic conditions

15. General control of the vehicle, confidence in driving, smooth gear changing and braking as and when necessary

16. Use of the rear-view mirror while driving

17. Use proper side of the road when driving straight, turning right, turning left and at junctions

18. Anticipate the actions of pedestrians, drivers of other vehicles and cyclists and courtesy to other road users

19. Take precautions at cross road and on road junctions with regard to
   a) Adjustment of speed on approach:
   b) Proper use of rear-view mirror:
   c) Avoidance of cutting right-hand corners:
   d) Looking right, left and right again before crossing or emerging:

20. Concentrate and driving without his attention being distracted and to demonstrate the presence of mind.

Certified that the driving test on the road was conducted by me for a distance of about………………K.M.on (date) ………………… at…………………………………
(Place)………………………………… Using (class of vehicle)……………………………………
…………………………………… bearing Regn.No……………………………………

He/She passed/failed the driving test in LMV/Two Wheeler/Three Wheeler/HGV/HPV.

Name and Signature of Candidate

Signature:

Name:

Designation:
INSTRUCTIONS

1. If the application is for a new driving licence, Part I, III & VI are to be filled in by the applicant.

2. If the application is for a new driving licence to drive a motor cycle with engine capacity not exceeding 50 CC by a minor, Part II shall also be filled in by the parent or guardian of the applicant and it shall be signed in the presence of the Licensing Authority/Addl./Asst.Licensing Authority.

3. If the application is for endorsing to drive another class of Non-Transport Vehicle, Part I, III, V & VII are to be filled in by the applicant.

4. If the application is for endorsing to drive a Transport Vehicle, Part I, III & VII are to be filled in by the applicant.

5. To prove the permanent address any one of the following documents shall be attached.
   - (Election ID Card/Life Insurance policy/Passport/Pay slip issued by any office of the Central/State Government or a local body/any other document or documents as may be prescribed by the State Government/Affidavit sworn before an Executive Magistrate or a First Class Magistrate or a Notary Public to be enclosed.)

6. To prove the date of birth and declaration of Citizenship status any one of the following documents shall be attached.
   - (Passport, Birth certificate, School certificate, Affidavit sworn before Executive Magistrate or Notary Public or a First Class Magistrate)

7. Part IV shall also be produced by the applicant who has attained the age of 50 years.

8. The minimum educational qualification shall be a pass in 8th standard in the case of applicant who is applying for endorsing a licence to drive a Transport Vehicle.

9. The applicant who is applying for addition of another class of vehicle shall submit his/her Driving Licence in original along with the applications.

10. Form 5 shall also be attached if the application is to drive a Transport Vehicle or by the applicant who has completed the course in a Motor Driving School or Establishment.

11. Dumb persons without deafness may be granted a valid certificate of Driving Licence for Non-Transport Vehicle.

12. Expansion of abbreviations given in the application forms are as follows.
   - (a) M.P.M.V. – Medium Passenger Motor Vehicle.
   - (b) M.G.V. - Medium Goods Vehicle.
   - (c) H.P.V. – Heavy Passenger Vehicle.
   - (d) H.G.V. – Heavy Goods Vehicle.
LEARNER’S LICENCE

Licence No…………………………….     Date…………………….

Name to be written across the photograph
Specimen signature/thumb impression of the holder of the licence.

Signature and seal of the licensing authority

1. Name : [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

is licensed to drive throughout India as a learner subject to the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, a motor vehicle of the following description:-

Warning:- The attention of the holder of this license is drawn to Rule 3 of the Central Motor Vehicles rules, 1989, which prohibits him from driving any motor vehicle unless he has besides him a person duly licensed to drive the vehicle and in every case, the vehicle carries “L” plates both in the front and in the rear of the vehicle.

NB: Detach this sheet after getting Learner’s Licence from the Licensing Authority.