FORM – 2

APPLICATION FOR THE GRANT RENEWAL LEARNER'LICENCE (See Rule 10)

To The Licensing Authority,																
I hereby apply for a licence authorizing material and all Invalid Carriage b) Motor Cycle without Gear c) Motor Cycle with Gear d) Light Motor Vehicle e) Transport Vehicle			e as	a le	arnei	the f	ollow	ing r	noto	r ve	hicle	e(s)				
f) Motor Vehicle of the following description																
i) Auto Rikshaw ii) Tractor and Trailer iii) Road roller iv)																
PARTICULARS TO BE FURNISHED BY APPLICANT																
1. Full Name (in capitals)																
2. Son/Wife/Daughter of																
3. Permanent address			l		1	<u> </u>										
(proof to be enclosed)																
4. Temporary/Official address																
(if any)							1			1						
5. Date of Birth																
6. Educational Qualification																
7. Identification Mark(s)																
8. Optical: Blood Group RH Factor																
9. I hold and effective driving licence to drive Motor cycle/light motor vehicle/medium passenger motor								or								
vehicle/medium goods vehicle with effect from																
10. Particulars of any driving licence previously held by applicant whether it was I cancelled and if so, for what reasons:									OI							
what reasons: 11. Particulars of any learner's licence previously held by applicant in respect of the description of vehicle to									to							
which the applicant has applied:																
Have you been disqualified for holding or obtaining driving licence or learner's licence, if so, for what									at							
reasons:																
13. I enclose 3 copies of my recent passport size photograph																
14. I enclose medical fitness certificate dated																
15. I have submitted along with my earlier application for learner's licence/enclose the written consent of parent/guardian (in the case of applicant being a minor)								of								
16 I enclose driving certificate dated issued by																
(Name and address of the driving school).																
17. I have paid the fee of Rs.																
18. I am exempted from the Medical Test																
19. I am exempted from the preliminary to	est ur	ıdeı	·Ru	le 11	(2)	of CM	V Rul	es, 1	989							
Deter																
Date:						O: -	4	о П	٠ ات	.1. Т			e.	- ما	1.	4
Place: Specimen signature or thumb impressions	of th	10.0	nnli	ant		Sigi	nature	or I	nun	ıu II	npre	ssion	ort	ne aj	ppII	Cant
opecanion signature of thumb impressions	or u	n a	Phin	cant												
1)						2)_										

DECLARATION UNDER SUB-SECTION(2) OF SECTION 7 OF THE MV ACT J988

Shri/Smt/Kum.							
who is a major is under my care/and I accept responsibilit	y for his/her driving. If at a later date I decide						
not to accept responsibility for his/her driving I shall into	mate the licensing authority in writing for the						
cancellation of the licence. I give my consent for his/her obtaining learner's licence.							
	Signature						
	SignatureName & Full Address of the Parent/Guardian						
	Name & Fun Address of the Fatent/Guardian						
	Relationship						
	(to be signed in the presence of the Licensing						
	Authority or Person authorized in this behalf						
	by the Licencing authority						
For Office Use:							
The applicant is exempted from the medical test under Ru	- · · · · · · · · · · · · · · · · · · ·						
of the CMV Rules, 1980 Learner's Licence may be issued.							
The applicant was tested with reference to Rule 11(1) of	the CMV Rules, 1989. He has passed the test						
Learner's Licence may be issued.							
He has failed in the test (Reasons should be specified)							
Learner's Licence may be refused.							
Strike out which ever is inapplicable.							

Signature of Licensing Authority Or other person authorized on this behalf