



DEPARTMENT OF MOTOR TRAFFIC SRI LANKA

Motor Traffic Act Chapter 203 Section 124, 126(1), 128(1)



APPLICATION FOR DRIVING LICENCE

Application for: New Extend Renewal Duplicate Conversion Change of Particulars Extend - Public Transport

FORM SHOULD BE FILLED IN ENGLISH

A PERSONAL DETAILS (ALL TRANSACTIONS)

1. ID Type (Tick Appropriate Box) NIC Sri Lanka Passport

2. ID/Passport Number

3. Surname

4. Other Names

5. Name to be printed on the card

6. Sex (Tick Appropriate Box) Male Female

7. Date of Birth / / 8. Age

Y Y Y Y M M D D

B ADDITIONAL PERSONAL DETAILS (ALL TRANSACTIONS)

1. Height FT Inches

2. Blood Group

3. Organ Donor Yes No (Tick Appropriate Box)

4. Permanent Address (Address to where the card will be posted)

5. Phone Number

6. Divisional Secretariat Four Digit Code

7. Driver Restrictions (Tick Appropriate Box) None Corrective Lenses Artificial Limb

C NTMI MEDICAL, POLICE, OLD LICENCE AND GRAMA NILADARI CERTIFICATE DETAILS

1. Date of NTMI Medical Certificate (EXTEND, RENEW & EXTEND PT) / /

Y Y Y Y M M D D

2. NTMI Medical Certificate Number (EXTEND, RENEW & EXTEND PT)

3. Date of Police Report (DUPLICATE & EXTEND PT) / /

Y Y Y Y M M D D

4. Police Station (DUPLICATE & EXTEND PT)

5. Old Driving Licence Number (CONVERSION)

6. Issue Date (CONVERSION) / /

Y Y Y Y M M D D

7. Expiry Date (CONVERSION) / /

Y Y Y Y M M D D

8. Grama Niladari Certificate Number (CHANGE OF PARTICULARS)

D	1. DRIVING LICENCE CLASSES	2. VEHICLE RESTRICTIONS				3. TRANSACTION TYPE			4. ISSUE DATE OF OLD CLASS / CLASSES (CONVERSION)							
		0	1	2	3	CON	REN	EXT	Y	Y	Y	Y	M	M	D	D
Please tick the appropriate box with an X																
A1	<input type="checkbox"/> Motorcycle Engine Capacity ≤ 100cc															
A	<input type="checkbox"/> Motorcycle Engine Capacity > 100cc															
B1	<input type="checkbox"/> Motor Tricycle - Tare ≤ 500kg, GVW ≥ 1000kg															
B	<input type="checkbox"/> All Cars/Dual Purpose - GVW ≤ 3500kg, Passengers ≤ 8, Trailer ≤ 250kg															
C1	<input type="checkbox"/> Light Motor Lorry - 3500kg < GVW ≤ 17000kg, Trailer < 750kg															
C	<input type="checkbox"/> Motor Lorry - GVW > 17000kg, Trailer ≤ 750kg															
CE	<input type="checkbox"/> Heavy Motor Lorry - GVW > 17000kg, Trailer > 750kg															
D1	<input type="checkbox"/> Light Motor Coach - Passengers < 32, Trailer ≤ 750kg															
D	<input type="checkbox"/> Motor Coach - Passengers > 32, Trailer ≤ 750kg															
DE	<input type="checkbox"/> Heavy Motor Coach - Trailer > 750kg															
G1	<input type="checkbox"/> Two Wheel Tractor with a Trailer															
G	<input type="checkbox"/> Agricultural Land Vehicle with or without a Trailer															
J	<input type="checkbox"/> Special Purpose Vehicle															
PT	<input type="checkbox"/> Public Transport Endorsement															
Commercial Class		<input type="checkbox"/> Void		<input type="checkbox"/> Activate												

In your own interest, you should read the notes below carefully:

Notes:

- A. Learners Licence is valid for 18 months only.
- B. All names must be written in FULL.
- C. Age Limits: Over 18: A, A1, B, B1, G, G1
Over 21: C, C1, CE, D, D1, DE and J
Over 23: PT

E PHOTOGRAPH, FINGERPRINTS, SIGNATURE AND DECLARATION (ALL TRANSACTIONS)
(Compulsory for Applicant who completed a written test during application)

PHOTO <small>(Photograph should be pasted on the application)</small>	FINGERPRINT LEFT HAND <small>Please indicate which finger on left hand was used for the fingerprint: (Tick the appropriate box where applicable)</small>	FINGERPRINT RIGHT HAND <small>Please indicate which finger on right hand was used for the fingerprint: (Tick the appropriate box where applicable)</small>
	<input type="checkbox"/> Left Thumb	<input type="checkbox"/> Right Thumb
	<input type="checkbox"/> Left Index Finger	<input type="checkbox"/> Right Index Finger
	<input type="checkbox"/> Left Middle Finger	<input type="checkbox"/> Right Middle Finger
	<input type="checkbox"/> Left Ring Finger	<input type="checkbox"/> Right Ring Finger
	<input type="checkbox"/> Left Little Finger	<input type="checkbox"/> Right Little Finger

APPLICANT DECLARATION I declare that I am not suffering from any mental or physical disability or any disease as would be likely to cause my driving to be a source of danger to the public. I also declare that the particulars given above are true and accurate to the best of my knowledge and I fully realize that if any of above particulars is found to be incorrect or false I am liable to be prosecuted or dealt with otherwise.

SIGNATURE	DATE																				
	<table style="margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td> <td style="text-align: center;">/</td> <td style="text-align: center;">M</td><td style="text-align: center;">M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D</td><td style="text-align: center;">D</td> </tr> </table>											Y	Y	Y	Y	/	M	M	/	D	D
Y	Y	Y	Y	/	M	M	/	D	D												



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ASSESSMENT

1 DATE OF ASSESSMENT										TIME				
2 DATE OF ASSESSMENT										TIME				
3 DATE OF ASSESSMENT										TIME				

1. Vehicle Class / Classes: 1 2 3

2. Vehicle Registration Number: 1 2 3

3. Preparations before driving: 3b. MC - Maneuver

	P	F		P	F		P	F
1	2	3	1	2	3	1	2	3

4. Controls & Devices

Acc	1	2	3
Steer	1	2	3
Stop	1	2	3
RoM	1	2	3

Clu	1	2	3
FBr	1	2	3
NoE	1	2	3
Oth	1	2	3

Gear	1	2	3
HBr	1	2	3
Dir	1	2	3
Reg	1	2	3

		O - Observation	D - Decision	A - Action
6. Starting and Moving off	- Straight ahead	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- At an angle	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Uphill	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Downhill	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
7. Driving in Junctions	- Left turn	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Straight ahead	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Right turn	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
8. Driving in Roundabouts	- Left turn	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Straight ahead	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Right turn	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
9. Driving in Traffic	- Lane (keep/change)	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Signalling	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Meeting oncoming Traffic	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Overtaking	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Passing stationary vehicle	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Anticipation/Action	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Other R users	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
10. Traffic Directives	- Policeman	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
	- Light signals	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
11. Reversing		<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
12. Stopping and Parking		<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
13. Emergency Stop		<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3
14.		<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3	<input type="radio"/> 1 2 3

15. Examiner Intervention: 1 2 3

REMARKS: Examiner should mark the respective boxes above with following signs: Minor mistake - / Serious mistake - X Dangerous mistake - XX

EXAMINER DECLARATION: I am satisfied that the applicant does not suffer from any mental or physical disability and certify that I have no reason to doubt the correctness of the information furnished by the applicant and that the height of the applicant is correct.

Signature	Signature	Signature
Rubber Stamp	Rubber Stamp	Rubber Stamp
Y Y Y Y / M M / D D	Y Y Y Y / M M / D D	Y Y Y Y / M M / D D

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