	1 DATE	1 DATE OF ASSESSMEN				Y	Υ	Υ	М	M M D D		1	ГІМЕ			Н				
ASSESSMENT	2 DATE	OF ASSES	SMENT	Y		Y	Y	Υ	M	M	D	D		٦	ГІМЕ			Н		
	3 DATE	OF ASSES	SMENT	Y		Y	Y	Υ	M	M	D	D			ГІМЕ			Н		
1. Vehicle Class / Classes	1						2						3	•						
2. Vehicle Registration Num	ber: 1						2						3	3						
1 2 3 3. Preparations b	efore driving		3b.	MC –	Man	euve	er	F		F	1		Р	F			Р		F	1
1 2 3 4. Controls & De	vices	Acc	1	2		3		Clu		1	2	3		۱ ۲	Gear	1		2	3	1
		Steer	1	2		3		FBr		1	2	3		ľ	HBr	1		2	3	1
1 2 3 5. Road Signs &	Regulations	Stop	1	2		3		No	E	1	2	3	=	Ĺ	Dir	1		2	3	1
	-	RoM	1	2		3		Ot	1	1	2	3	\dashv	ľ	Reg	1		2	3	1
							Obse			-		ecisio	 on	L			Actio]
1 2 3 6. Starting and M	loving off	- Stra	ight ahe	ead	Γ	ο	1	2	3] [D	1	2	3] [Α	1	2	3	
		- At a	n angle		Γ	ο	1	2	3	1 [D	1	2	3	1 [Α	1	2	3	
		- Uph	ill			ο	1	2	3		D	1	2	3	1	Α	1	2	3	
		- Dov	/nhill			ο	1	2	3	1 [D	1	2	3	1 [Α	1	2	3	
1 2 3 7. Driving in Jun	ctions	- Left	turn			ο	1	2	3	Ī [D	1	2	3	Ī [Α	1	2	3	
				ead		ο	1	2	3	1	D	1	2	3	1 [Α	1	2	3	
		- Rigl	nt turn			ο	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 8. Driving in Rou	Indabouts	- Left	turn			ο	1	2	3] [D	1	2	3] [Α	1	2	3]
		- Stra	ight ahe	ead		ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Rigl	nt turn			ο	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 9. Driving in Traf	fic	- Lan	e (keep	/chang	e)	ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Sigr	nalling			ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Mee Traffi	eting on c	coming		ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Ove	rtaking			ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Pas vehic	sing sta le	tionary	'	ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Anti	cipatior	Action	۰ [ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Oth	er R use	ers		ο	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 10. Traffic Direct	ives	- Poli	ceman			ο	1	2	3		D	1	2	3		Α	1	2	3	
		- Ligh	nt signal	S		ο	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 11. Reversing						ο	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 12. Stopping and	l Parking					0	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 13. Emergency S	itop					ο	1	2	3		D	1	2	3		Α	1	2	3	
1 2 3 14.																				_
15. Examiner Intervention		1							2							3				
REMARKS: Examiner	should mark t	he respect	ive box	es abo	ove w	ith fo	ollowii	ng sig	ns		Minor mi	stake -	/ s	erious	mistak	e – X	Dange	rous mi	stake -	XX
EXAMINER DECLARA correctness of the information fu	TION I am sa	tisfied that th	ne applic	ant doe	es not	suffer	r from	any me	ental or	physi	ical disa	bility a	nd ce	rtify th	nat I ha	ve no	reason	to dou	bt the	
	rhished by the a	pplicant and	that the	neight o	orthe	apping	cant is	correc			-									
Signatu	ro				S	iana	ature	e							Sia	natu	ire			
Signatu	10					.9.10		_							2.9					
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						I, 126(1), 128	3(1)	
Application for:							Change of	Extend - Public Transport
(Tick Appropriate Box)	/	Extend	Renewa	HOULD BE FI			Particulars	Extend - Public Transport
A PERSONAL DETAIL	.S (#	ALL TRANS	SACTIONS)					
1. ID Type (Tick Appropriate Box)	NIC		Sri Lanka P	assport				
2. ID/Passport Number								
3. Surname								
4. Other Names								
5. Name to be printed on the	card							
(Tick Appropriate Box)	/lale	Female		Date of Birth	Y Y	/ [M M D D	8. Age
B ADDITIONAL PERSO 1. Height	ONAL [(ALL TRA	NSACTION	S)			
	es	2		P		3. Org	gan Donor Yes (<i>Tick Appre</i>	opriate Box)
4. Permanent Address (Address to where								
the card will be posted)								
5. Phone Number								
6. Divisional Secretariat			our Digit Code					
(Tick Appropriate Box)	None		Corrective Ler		ficial Limb			
C NTMI MEDICAL, POL			ICE AND G	RAMA NILA		RTIFICATE L	DETAILS	
(EXTEND, RENEW & EXTEND PT))	Y Y	Y Y	/ [
2. NTMI Medical Certificate Nu (EXTEND, RENEW & EXTEND PT)								
3. Date of Police Report (DUPLICATE & EXTEND PT)		YY		/ [
4. Police Station (DUPLICATE & EXTEND PT)								
5. Old Driving Licence Number (CONVERSION)	r							
6. Issue Date (CONVERSION)		Y Y	/ [/ _	D D	7. Expiry Date (CONVERSION)		
8. Grama Niladari Certificate N (CHANGE OF PARTICULARS)	lumber							

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		2	VEHICU	F	0 TP			4 100			SECTION F, G, H AND	I FOF				
D 1. DRIVING LICENCE CLASSES			RESTRICTIONS			. TRANSACTION TYPE		4. ISSUE DATE OF OLD CLASS / CLASSES			F PAYMENT DETAILS (ALL TRANSACTIONS)					
	1. DRIVING LICENCE CLASSES	1- Aut 2- Phy	itomatic Transn ysically Disable ectrically Power	ed	CON = Conversion REN = Renewal EXT = Extension			(C	ONVERS	ON)	1. Payment Type BANK CASHIER					
se t	ick the appropriate box with an X		1 2			REN		YYY	YM	MDD	2. Amount Paid					
1	Motorcycle Engine Capacity <u><</u> 100cc										3. Initials of the Cashier (Only When Cashier)					
	Motorcycle Engine Capacity > 100cc										4. Cashier Surname					
	Motor Tricycle - Tare <u>≤</u> 500kg, GVW <u>≥</u> 1000kg										G WRITTEN AND PRACTICAL TEST DETAILS New					
	All Cars/Dual Purpose - GVW <u>≤</u> 3500kg, Passengers <u>≤</u> 8, Trailer <u>≤</u> 250	lkg									1. Written Test Pass Date					
:1	Light Motor Lorry - 3500kg < GVW <u><</u> 17000kg, Trailer < 750kg										Y Y Y Y M M D D					
	Motor Lorry - GVW > 17000kg, Trailer ≤ 750kg										2. Authorized By					
	Heavy Motor Lorry - GVW > 17000kg, Trailer > 750kg										3. Practical Test Pass Date / / /					
	Light Motor Coach - Passengers < 32, Trailer <u><</u> 750kg										4. Vehicle Class A1 A B1 B C1 C					
	Motor Coach - Passengers > 32, Trailer <u><</u> 750kg										5. Name of the EMV					
DE Heavy Motor Coach - Trailer > 750kg																
	Two Wheel Tractor with a Trailer										H PRACTICAL TEST DETAILS New					
	Agricultural Land Vehicle with or without a Trailer										1. Practical Test Pass Date					
	Special Purpose Vehicle										2. Vehicle Class					
Г	Public Transport Endorsement															
	Commercial Class	Y	Void		Activat	te					3. Name of the EMV					
lotes:	In your own inter	est, you s	should re	ead the	notes	below	carefully	':			I PRACTICAL TEST DETAILS New					
All na	ers Licence is valid for 18 months only. mes must be written in FULL. imits: Over 18: A. A1, B. B1, G, G1										1. Practical Test Pass Date Y Y Y Y M M D D					
	Over 21: C, C1, CE, D, D1, DE and J Over 23: PT															
PHC (Comp	DTOGRAPH, FINGERPRINTS, SIGNATURE AND bulsory for Applicant who completed a written test during application)			N (ALL	. TRAN						3. Name of the EMV					
hotograp			n			F	dicate which fir	DINIT DICL								
	PHOTO h should be pasted on the application) FINGERPRINT L Please indicate which finger on left han (Tick the appropriate box wh	EFT HANI d was used for th ere applicable)	b he fingerprint:			Please in	(Tick the appr	nger on right hand opriate box where	T HAND was used for th applicable)	e fingerprint:						
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