

## Application for Lorry, Bus or Minibus driving licence

## Please read booklet INF2D before filling in this form.

For more information go to www.direct.gov.uk/driverinfo

D2

Please use CAPITAL LETTERS and fill in this form in black ink.	2 Your de	taile		Official use only
1 What are you applying for?	Your GB driver numb			Passport
Please put 🕱 against all that apply:	roar ab arrest ram	oei (ii you know it).		B/cert
Provisional (remember to enclose your full category B or BE licence)  Lorries Category  C C1 C1+E	Title: Mr Mrs	Miss Ms Other (t	for e. Dr)	M/cert
Buses	Surname:			ID Card
Category D L D1 L Are you in the Young Drivers	First names:			
Training scheme? Yes No No Military drivers only (see page 4 of the INF2D)		DENIMEVVIV	7	Other
Do you serve in the armed forces? Full time Part time	Date of birth:			
What categories do you need a licence for?	Full current addres	SS		No ID
All ordinary driving licences All lorry All bus	House No.			IPS
To change my name and/or address on my licence				No IPS Cons
To replace my licence as it has been:				No Photo
lost stolen defaced destroyed		Postcode		Disease Avails
To exchange my non-GB licence for a British one		bove have changed since you ive the previous details belo	ur last licence	Photo Auth
If your licence has been withdrawn, suspended or cancelled in any other country (e.g. because of disqualification),		,		Req Add ID
please state which country.				Inspect Sec/Reas
• To exchange my licence after passing a test				
Enter categories passed here:	Country you were born			DAM Addr
To renew the photo on my licence	If you have lived in ar EC or EEA country in	the last		
• To renew my licence	12 months, please te What date did you		Transport Control	S-Doc
As my existing licence is due for renewal What categories do you want to renew?  Lorry Bus	come to live in the U If possible, please pro	ovide a phone number and/or	e-mail address	Non-Pres
For medical reasons	Full phone/mobile nu	t you if there is a problem with imber:	your application.	Amount
Because it was revoked or I was disqualified  If you were disqualified in the UK please give (if you know it):				
the date:	E-mail address:			Lic Encl
and the name of the court:				Lic Issue No
At age 70 or over	3 Your ey	esight and your he	earing	
Do you need C1/D1 entitlement?	Please see note A c Can you read a car r		L	ocal Office/Post Offic date stamp
Do you need to drive minibuses on a voluntary basis? Yes	glasses or corrective	lenses if necessary)		
Organ donation	from 20.5 metres?  Do you need to wear	Yes glasses or corrective	No L	
I want to register my details on the NHS Organ Donor Register as someone whose organs/tissue may be used for transplantation after	lenses when driving?	Yes r glasses or corrective	No No	
my death. Please put 🕱 in the boxes that apply.	lenses to meet the le	egal eyesight		
Any of my organs and tissue	standard for lorry or	bus vehicles? Yes	No L	
Back of photo	Are you profoundly o	leaf? Yes o communicate in the	No _	
Convictions	event of an emergen using a device, for e	cy by speech or by	No.	
		xample, textphone? Yes ou are applying for large vehicle e		
should give details below of dri	ving offences relating to d minibus or bus entitlemer	rivers' hours or records, roadworth it, you should also tell us about ar	niness or loading	
for non-driving offences.	Court	Offence	Sentence or fin	ie
Date of conviction				
	ed to and attach it to this	form. See page 7 of the INF2D	for more information	
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4 Your health		5 Your proof of iden	шту
ease see note A on opposite page. If you have a	already told us about a	Please see note B on opposite page	
edical condition that could affect your fitness to dri w medical condition – miss out part A and go on t		Part A - Digital UK passport hole	ders
art A		Digital UK	
ave you ever had, or do you currently suffer om any of the following conditions?	Yes No	passport number: I agree that DVLA can verify my identity with the	e Identity and Passport Service (If
you have answered 'Yes', please put 🗷 in all	the appropriate boxes	Signature:	
Diabetes controlled by insulin		Please do not send in your digital	UK passport if you have
Diabetes controlled by tablets		signed above.	ort passoport, ir you nav
Epilepsy		Part B - Documents enclosed to pro	ove your identity
Any condition affecting either eye		Please put 🕱 against all original docu	ments enclosed.
Not including colour blindness or short of Any form of stroke including TIA	or long sight	As birth certificates are not absolute also send one other form of identific of booklet INF2D.	e proof of identity, you mu cation. Please see page 10
Fits or blackouts	П		FO/FFA identity could
		Passport UK birth/adoption certificate	
Any type of brain surgery, severe head injuinvolving in-patient treatment, or brain turn		Evidence of SRP (State Retirement Pens	
Angina, other heart condition or heart operation		UK Identity Card for Foreign Nationals/ Please write the serial number(s) of the	
	alion	ricase with the serial number(s) of the	accument(s) you are enclosi
An implanted cardiac pacemaker	H	Documents enclosed to verify a	change of name
An implanted cardiac defibrillator (ICD)		Please put 🕱 against the original doc	
Repeated attacks of sudden disabling gide	diness	This must show a clear link to your cu	
Any other <b>chronic</b> neurological condition		if different from that shown on your digital identity document(s) that you are enclosed.	
including Multiple Sclerosis, Motor Neurone and Huntingdon's Disease	e		rship certificate
A serious problem with memory or periods o	of confusion		r statutory declaration
		Please write the serial number(s) of the d	
Persistent alcohol misuse or dependency	H		
Persistent drug misuse or dependency		Photocopied documents are not acc	eptable.
Serious psychiatric illness or mental ill hea	alth $\square$		
Parkinson's disease	H	6 Signing a photo to	verify identity (if ne
Sloop appoor aundrama			
Sieep apridea syndrome	H	See page 11 of booklet INF2D	
		See page 11 of booklet INF2D  • I have known the applicant for	ears (please state how mar
Narcolepsy		<ul> <li>I have known the applicant for must be at least two years within the</li> </ul>	UK).
Narcolepsy  Any condition affecting your visual field		I have known the applicant foryou must be at least two years within the     I can confirm it is a true likeness.	UK).
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