



ROAD TRAFFIC RULES - LICENSING OF DRIVERS 2017

APPLICATION FOR DRIVER'S LICENCE

Surname / Family name: Given names:

Residential and street address:

Sect: Lot: Street: Suburb:

Postal Address: Town: Province:

Phone (Day): Mobile:

Gender: Male / Female Date of Birth:

Place of birth: Village: Province:

Town:Country:

Nationality:

Height (cm): Eye colour: Hair colour: Complexion:

Type of Licence applied for: provisional / full Class:

Period of licence: years.

Old licence no.: Date of issue: Place of issue:

TO BE COMPLETED BY HOLDER OF FOREIGN DRIVER'S LICENCE

Country of issue: Licence no.: Date of expiry:

Equivalent PNG Class for which licence valid:

Is there anything wrong with your health that may affect your safe driving?	YES/NO	
Have you ever been refused a learner's permit or driver's licence anywhere?	YES/NO	
Has your driver's licence ever been cancelled or suspended?	YES/NO	
Have you ever been convicted of driving under the influence of intoxicating liquor (drink driving) or driving under the influence of drugs?	YES/NO	
Have you ever been convicted of any traffic offence other than parking?	YES/NO	

I enclose K....., being the fee prescribed in the Road Traffic (Fees and Charges) Regulation.

Signature of applicant:

Witness:

Witness Address:

Date:

CERTIFICATE OF COMPETENCY

TO BE COMPLETED IN CASES WHERE APPLICANT UNDERTAKES TEST

Eyesight: Oral/Written knowledge test: Driving Test:

Test done with/without spectacles. Disabilities apparent:

Signature of Testing Officer:

PASS / FAIL Reg. No.

I, the above named, declare that to the best of my knowledge and belief the above details and answers are true and correct.

Applicant:

Witness:

Date:

Receipt No.: Licence No.:
