



Application for a Driver Licence

This is a document required by law under the *Road Transport Driver Licensing Act 1999*.
If you knowingly provide false information on this application, you may be prosecuted.

Personal details

Surname

Given name

Other name/s

Gender

☐ Male ☐ Unspecified ☐ Intersex ☐ Unknown
☐ Female ☐ Indeterminate ☐ Unspecified/Indeterminate/Intersex

Residential address

Postal address

Date of birth

 / /

Email address

Have you ever been known by any other name/s? ☐ Yes ☐ No

Previous name/s

Contact number (mobile phone)

Contact number (other)

Please provide details if you hold (or have held) any of the following ACT issued cards (one card is sufficient):

<input type="checkbox"/> Yes <input type="checkbox"/> No	ACT issued Driver Licence	<input type="text"/>	Licence number
<input type="checkbox"/> Yes <input type="checkbox"/> No	ACT issued Proof of Identity card (Proof of Age)	<input type="text"/>	Customer number
<input type="checkbox"/> Yes <input type="checkbox"/> No	ACT issued High Risk Work Licence	<input type="text"/>	Licence number

Previous licence details

Licence number(*interstate/overseas) Type

Class

State / Country issued

Expiry date

 / /

Surname on licence

Licence surrendered

Yes ☐ No ☐

For interstate transfer of licence

Does your licence expire within 12 months? Yes ☐ No ☐ If Yes, would you like to renew today? Yes ☐ No ☐

National Heavy Vehicle driver licence applicants only

Place of birth

Height

Eye colour

Provisional / Probationary

Period held

ACT expiry

 / /

Additional provisional

Class

Period held

ACT expiry

 / /

Application continues over the page.

Office use only

Licence number

Proof of identity

Proof of residency

Eye test results

Both Right Left

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With corrective lenses ☐

CSO initials

Licence questionnaire

Note: All questions must be answered. If you answer 'Yes' to the first question, include the following details; date, place, nature of offence, reason for cancellation, suspension, disqualification or refusal and penalty or period.

1. Is your licence currently or pending action to be suspended, cancelled, or disqualified anywhere in Australia? Yes ☐ No ☐
2. Are you currently serving a 'good behaviour' election period as an alternative to a demerit point suspension anywhere in Australia? Yes ☐ No ☐
- 2.1 What demerit point suspension period would you have had if you did not elect for a good behaviour period? 3 months ☐
4 months ☐
5 months ☐
3. Is your right to drive currently or pending action to be suspended anywhere in Australia? Yes ☐ No ☐
4. Are you taking any medication that may impact your ability to drive? Yes ☐ No ☐
5. Do you have any long term illness, injury or condition that could affect your ability to drive safely (or the treatment for which may affect your driving)? Yes ☐ No ☐

Examples of such conditions include:

- Blackouts
- Cardiovascular disease
- Dementia
- Diabetes
- Musculoskeletal conditions
- Long term disability to hand, arm, foot, leg or eye
- Neurological conditions such as epilepsy, dementia and cognitive impairment due to other causes
- Psychiatric conditions
- Substance misuse / dependency
- Sleep disorders
- Vision problems

These conditions may affect sensory, cognitive or motor function, or a combination of these.

It is accepted that other medical conditions or combinations of conditions may also be relevant and that it is not possible to define all clinical situations. Please advise if you have any conditions that may affect your overall function to safely drive. If you're unsure if a condition affects your ability to drive, please call 13 22 81 so we can assist you.

If you answered 'Yes' to any of the above questions please provide further details.

If you answered 'Yes' to question 4 or 5, you are required to provide a Driver Licence Medical form completed by your own doctor stating that you are a medically fit person to drive a motor vehicle before issue of your licence. In some cases, you are required to provide a specialist report.

Declaration (For public vehicle licence applicants only)

I agree for Access Canberra to search and access my details held by the Commissioner for Fair Trading under the Working with Vulnerable People (WWVP) Scheme for the purposes of verifying that I hold a current WWVP registration in the consideration of my application for a Public Vehicle Licence. ☐ Yes ☐ No

Declaration

I consent to Access Canberra conducting a Certificate Validation Check of my documents and declare to the best of my knowledge that the information in this application is true and correct and request the issue of a Driver Licence. By signing this application you agree that, if at any time, you have any long term illnesses, injury or incapacity that may impair you ability to drive safely, you will notify Access Canberra within 7 days.

Applicant's signature

Date

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Privacy Statement: The personal information on this form is being collected by Access Canberra (part of the Chief Minister, Treasury and Economic Development Directorate) for driver licensing purposes as authorised by the *Road Transport (Driver Licensing) Act 1999*. The information may be used for the administration of driver licensing and vehicle registration legislation and enforcement. Access Canberra will include your information in its "one client record" so that it can be used in respect of any other dealings that you might have with it. Information about your identity, which forms part of your one client record, will also be used for administrative purposes, including to confirm that we are dealing with the correct individual. Your personal information may be used or disclosed to other ACT Government Directorates, Commonwealth, State and other Territory government agencies, transport authorities, law enforcement and court agencies, authorised by law; the Motor Accident Injuries Commission; Austroads Ltd; the National Heavy Vehicle Regulator; the National Capital Authority and individuals, their agents or insurers following a report provided to the police of a motor vehicle accident. Personal information and health information related to the assessment of your compliance with the required medical standards may also be disclosed to medical professionals and driving assessors only as is needed to assess your ability to drive safely. Access Canberra is authorised to retain a digital copy of your photograph and signature under Part 4 of the *Road Transport (Driver Licensing) Act 1999*. Retained images may be used to assist in addressing identity fraud and disclosed to law enforcement and court agencies, interstate road authorities, or when authorised by law. If you choose not to provide the personal information requested on this form, we may not be able to process your request. Personal information for this application is not normally disclosed to overseas recipients unless required by law. Personal information that you provided is used or disclosed for the purpose for which it has been provided. Personal information is held and managed in accordance with the *Information Privacy Act 2014*, and in the case of personal health information, the *Health Records (Privacy and Access Act) 1997*. You can get more information about Access Canberra's privacy policy which explains how it handles your personal information, including how you may access personal information about yourself, seek correction of your personal information held by Access Canberra or complain about an interference with your privacy from act.gov.au/acprivacy.