COMMERCIAL DRIVER LICENSE BUS/SCHOOL BUS EXAMINATION APPLICATION

CDL CLASS A, B or C OPERATOR'S PERMITS, LICENSES OR WAIVERS

		1	,							
Office Use Only										
	FIRST NAME	INIT	AL	LAST NAME						
PRINT						MAILING				
PLACE OF						ADDRESS				
RESIDENCE	и. с.	C-1	II-:-l-4	W-:-l-4	C	T-1	- N	g: -1 g	N	L
Date of Birth	Hair Color	Color of Eyes	Height	Weight	Sex	relephor	ne Number	Social Se	ecurity Num	ber
Month Day Yea	ar Optional		Feet Inches	Pounds	M or F			(RE	QUIRED)	
•		▶ PLE	EASE ANSW	ER THE FO	LLOWI	NG QUESTI	ONS •	——		•
1) Place of birth										NO
City or Town State or Country								YES	110	
2) Are you app	nlying for a	n instruction	n permit exa	amination?						
2) 1110 you up	pry 1118 101 u	ii iiisti uct ioi	- permit en							
3) Have you c	ompleted a	course in D	rivar's Educ	nation?						
	-				C	М.	41 4			
· -	4) Do you hold or have you ever held a valid driver's license from Maine or any other state, country									
or province; V	Where?									
Class:	Expiration Date: Endorsements:									
5) Have you e	ver held a N	Maine instru	ction permi	it or Non-di	river id	entification	card?			
If yes, under v	vhat name?	(Print)								
6) Have you been convicted of violating any motor vehicle laws within the last ten years?										
		eu or violat	•				si ien years	5 !		
What was the	violation?			Date:		Where:				
7) Is your privilege to operate a motor vehicle under suspension or revocation in this state or any										
other state or province?										
8) Do you have any of the following medical conditions?										
Epilepsy/Seizures Blackouts/Loss of Consciousness Stroke/Shock Other										
Diabetes Limb Amputation Parkinson's Disease (note										
Heart Troubl	le	Paralysis	_			ntal/Emotion		condition)		
		r ararysis				21110 1101				
9) Are you currently disqualified to operate a commercial vehicle by FMCSR?										
10) Please list all states, provinces or countries that you have been licensed in the past 10 years:										
10) I lease list	an states, p	novinces of	countries ti	nat you nav	C DCCII	iicciisca ii	the past 1	o years.		
11) I - (C d d I - d - d - d - d - d - d - d - d -										
11) I certify that I meet medical requirements contained in Section 391 of the FMCSR.										
12) I certify that	t I am <u>not</u> sub	ject to Section	391 of the Fe	ederal Motor	Carrier S	Safety Regula	tions (FMCS	R).		
13) I certify that the motor vehicle in which I will take my driving and skills test is representative of the type of vehicle										
that I expect to operate.										
										•
I am aware that any misstatement on this application will result in immediate suspension or revocation of										
my permit or license and my privilege to operate in the State of Maine may be suspended for a period to be										
determined by the Secretary of State. Furthermore, I understand that knowingly supplying false										
information on this form is a Class D crime.										
SIGNATURE OF APPLICANT DATE										
NO NICKNAMES										
Under 18 Requi SIGNATURE OF P					RELATIONSH	IIP:				

	CHECK	A BOXES THAT APPLY TO YOUR APPLICATION				
\$35.00	Class A: for the operation of a combination of vehicles with a gross vehicle weight rating or registered weight of 26,001 or more pounds, if the gross vehicle weight rating or gross weight of the vehicles being towed is in excess of 10,000 pounds. A holder of a Class A license may, with an appropriate endorsement, operate a vehicle in Class B or C.					
\$35.00	Class B: for the operation of a single motor vehicle with a gross vehicle weight rating or registered weight of 26,001 or more pounds or such a vehicle towing a vehicle with a gross vehicle weight rating or gross weight not in excess of 10,000 pounds. A holder of a Class B license may, with an appropriate endorsement, operate a vehicle in Class C.					
\$10.00	Class C: for the operation of a single vehicle or a combination of vehicles that does not meet the definition of Class A or Class B license. A holder of a Class C license may, with an appropriate endorsement, operate all vehicles in that class.					
		Examination: If you require an oral examination you must bring your own reader/translator at time of test. rican Sign Language interpreters will be provided by the Bureau of Motor Vehicles upon advance request.)				
\$10.00 fee t	for each e	endorsement checked below.				
	H	Hazardous materials. (Must be 21 years of age. Transportation Security Administration fingerprinting and background check required. For more information access www.hazprints.com)				
	N	Tank Vehicles: required on any CDL when transporting liquid or gaseous material in a tank; or any portable tank having a rated capacity of 1000 gallons or more.				
	T	Double/Triple Trailers: required for operators who haul Double/Triple Trailers. (Where operation is permitted by law)				
	Passe	enger and School Bus endorsements (P, S or Z) require Skill and Road Tests.				
	P	Passenger: required on any class license when the vehicle being operated is designed to seat more then 15 passengers including the operator. Class B license is required if the vehicle exceeds 26,000 pounds GVWR. School Bus is <i>NOT</i> included.				
	S	School Bus: designed to carry over 15 passengers including the driver. If GVWR is 26,001 pounds or more, Class B CDL with P endorsement is required. If GVWR IS 26,000 pounds or less, a Class C CDL is required. P endorsement is included at NO FEE when applying for School Bus endorsement. You must be 21 years of age and have held a valid license for one full year. Completed Department of Education School Bus Driver Physical Exam Form must accompany this application.				
	Z	School Bus: designed to carry 15 Passengers or less including the driver. Commercial driver's license not required. Completed Department of Education School Bus Driver Physical Exam Form must accompany this application.				
	PLEA	SE MAKE CHECK or MONEY ORDER PAYABLE TO: Secretary of State				
indicate your	date of bi	cation required when application is submitted and also at time of testing. One form of identification must rth and the other must bear your written signature. If you are the holder of a driver's license from any state es of the front and back of the license MUST ALSO be produced. Acceptable ID includes;				
Application Doctor (Par	n, Court Ord or/Hospital, ent/Guardia	ptismal records, Birth Certificate, Citizenship Papers, Concealed Weapons Permit (gun permit), Copy of Marital der, Divorce Papers, Draft Card, Driver Education Card, Driver's License, Driver's Permit, Medical Records from Military Dependent I.D. Card, Military Discharge/Separation (DD-214), Military I.D.Card, Parent/Guardian n must appear in person and prove his/her identity- applies only to minors), Passport, Social Security Card.				
		quired for applicants under the age of twenty-three. Photocopy of the Birth Certificate must have AL or STAMP of the issuing agency. Notarized copies are NOT acceptable.				
*Applicants	s 15 years	of age may hold an instruction permit, but may not apply for road test and be issued a license				
		xteenth birthday. Applicants under 18 years of age must meet Driver's Education requirements. s application must be answered and accompanied by the required materials or the application will				
		undue delay in being scheduled for an examination. of the examination for a license may be waived for the holders of a VALID out-of-state license.				
Must produ	ce copy (1	front and back) of out-of-state license.				
	Mail t					
		BUREAU OF MOTOR VEHICLES CDL SECTION STATE HOUSE STATION # 29				
		AUGUSTA, MAINE 04333				
*	*PI FAC	F INCLUDE ALL FEES & IDENTIFICATION WITH THIS APPLICATION**				

Manual available online: www.maine.gov/sos/bmv Please mail a CDL Manual