| | | | | Applica | ation Num | ber | | |
|------------------------------------|--|--|-----------|-------------|--------------|-----------|----------|------------------------|
| | | ation for Services on Existing Licuctions on page-5 carefully before | | | ehicle * | 0 | LL OD | L |
| To The Licensing Authority | | | | A | adhaar No | : | | |
| State * | | | | | | | | |
| Name of the RTO/DTO Office* | | | | | | | | |
| Part – A | | | | | | | | |
| 1. Specify the details of the DL | already held by the appl | licant | | | | | | |
| Licence Number * | Туре | State | Licen | cing Author | rity that Is | sued * | | f Issue M -Y Y Y Y) |
| | | | | | | | | |
| | | | | | | | | |
| | First Name* | Middle Name | Last Name | | | | | |
| 2 Name of the applicant | | | | | | | | |
| Gender* 2.1 Date of Birth* | Male Female | | | | | | | |
| (dd-mm-yyyy) | | or 2.2 Age(In Years) | | | | | | |
| 2.3 Mobile Number* | | | | | | | | |
| 2.4 Place of Birth | | | | | _ | | | |
| 2.4(a) If place of birth is ou | tt side India, Month & Yea | ar when migrated to India: | Month | | Year | | | |
| 2.4(b).Country by Birth * | | | · Ox | 7 T | | | | |
| 2.5 Citizenship Status By * | Birth (Regist | tration Oescent Naturaliza | tion (Non | Indian | | | | |
| 2.6 Email Address | | | | | | | | |
| Part – B 3.1*Requested Transaction | on Service (with class of v | vehicle) | | | | | | |
| (DL Revalidate is renewal of S.No. | of Driving Licence that we Description of Ve | | Duplicate | | DL Trans | anations. | | |
| 5.140. | Description of ve | micie Type | LL | Add a new | PSV | Surrender | | |
| | | | | COV | Badge | of COV | Validate | |
| | | | | | | | | |
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| S.No. | Description of Vehicle Type | Duplicate LL | DL Transactions | | | |
|------------------------------|--|-----------------|------------------|--------------|------------------|----------------|
| | | | Add a new COV | PSV Badge | Surrender of COV | Re Validate |
| | | | | | | |
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| | | | | | | |
| 1 LI 2 LI 3 LI 4 LI | Licencing Authority Code Licencing Authority Code | | | | | |
| S.No. | Requested Transactions (Independent of Class of Vehicle) | | | | | |
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| | | | | | | Application | n Number | |
|---|-------------|--------------------|------|-----------|----------|------------------------|--------------|----------|
| Reasons for Late Renewal / DL N | ot Attache | ed, etc | | | | | | |
| | | | | | | | | |
| Part – C | | | | | | | | |
| 4) List of Enclosures (Applicant s | hould prod | duce the original | docu | ıments be | fore the | Licensing Authority at | the office. |) |
| | | Licence Numbe | | | | | | of Issue |
| Document Type | | No./Badge No., etc | | | Issuing | g Authority/RTO Code | (DD-MM-YYYY) | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| D. 4 D | | | | | | | | |
| Part – D 5. if Paguest includes Change of 3 | Nama | | | | | | | |
| 5. if Request includes Change of I a)Applicant Name Changed as | | | | | | | | |
| First | Name | | | Middle N | lame | Last Name | | |
| | | | | | | | | |
| | | | | | | | | |
| 6. If Request includes Change of | Address: (j | provide the detai | ls) | | | | | |
| Permanent Address changed as | | | | | 1 | Present Address chan | iged as | |
| Present Address is sa | me as Perm | nanent Address | | | | | | |
| a) Flat Number | | | | | | | | |
| b) Flat / House Name | | | | | | | | |
| c) House Number/Plot No | | | | | | | | |
| d) Street | | | | | | | | |
| e) Locality | | | | | | | | |
| f) Village / Town / City | | | | | | | | |
| g) Taluka / Mandal | | | | | | | | |
| h) District | | | | | | | | |
| i) State Code | | | | | | | | |
| j) PIN code * | | | | | | | | |
| k) Phone | <u>'</u> | | | | | | | |
| l) Mobile * | | | | | | | | |
| m) Duration of Stay at this address | Years | Month | ıs | | | Years | Mont | hs |

| | | Application | Number | |
|---|--|---|----------|---------|
| Part – E | | | | |
| , | g with my application for Learner's Licence,. essary Enclosures / Certificates: - | 0 | Yes | O No |
| 8. I have been convicted / my Licence was revok | disqualified / my Licence was cancelled /suspe | ended / | Yes | ○ No |
| (If Yes, attach Documents | 3): | | | |
| If Yes, DL Number | | Date of Conviction (dd-mm-yyyy) | | |
| Reason | | | | |
| I hereby declare that to the necessary documents required | e best of my knowledge and belief the particula iired as per the rules. | urs given above are true and I have enc | losed al | l the |
| Date | | Signature or Thumb impression of | the App | olicant |

Instructions for filling up the Unified Application Form for Existing Services on a Licence

- This form can be used for applying for services on Existing Learner's Licence (LL) or Driving Licence (DL).
- 2. Please fill up the data with CAPITAL letters only.
- Columns marked as (*) are mandatory. 3.
- Enclosures: The Applicant should produce the proof for claims made in the Application where ever necessary. A set of codes defined for each of such type of enclosures 4. to the application is shown in HELP section (See Code List - A,B,C)

 The Licensing Authority Code or RTO Code: The RTO/DTO/RLA office under whose jurisdiction the applicant resides or his/her place of business.
- 5.
- Name of the Applicant: Fill the Applicant's name in the order of first name, middle name and surname/family name. However, ensure that the name is entered as per the relevant records being produced as proof.
- Eg. JANGA REDDY CHEBANDI, DEVSINGH NAIK, SULTAN ISMAIL MOHAMMED

 Class or type of Vehicle(COV): Different class of vehicles are given in column 3.1. If the requested service is "Add a new COV", then at least one class / type of vehicle should be selected to fill the unified application form. 7.
- Part- A : Specify the details of the DL already held by the applicant i.e 1 of Part A 8.
- Part B: It is mandatory to select at least one service from column 3.1 or 3.2. If the service is for duplicate LL, then the LL Number has to be mentioned in column labelled as 9. "If Request is for duplicate LL then specify LL No."
- Part C: It is mandatory to fill column 4 to provide details on the required documents like age proof, qualification proof etc. If you are holding a DL or LL, please mention 10. those details also in these columns.
- Part D: Fill column 5 if the requested service is for Change of Name, column 6 if the requested service is for Change of Address
- Part E: The applicant shall fill in this part wherever applicable.
- Part F: For Office Use only.