



GOVERNMENT OF ANGUILLA

INLAND REVENUE DEPARTMENT



DRIVER'S LICENCE APPLICATION TO ISSUE A NEW DRIVER'S LICENCE

FIRST SCHEDULE
FORM 8
FORM OF PARTICULARS TO BE GIVEN BY APPLICANT
FOR ISSUE OF A NEW DRIVER'S LICENCE

The Vehicles and Road Traffic Ordinances – Anguilla
To be completed by applicant

1. Full name (First, Middle, Last)	
2. Date of birth	
3. Physical address	
4. Postal address (P. O. Box #)	
5. Telephone #	
6. Email address	
7. Gender	
8. Blood Type	
9. Height	
10. Have you passed a driving test? If so, please present the Certificate of Competency	
11. Class of licence to be issued	
12. Are you converting an overseas driver's licence to an Anguillan licence? If so, please present approved letter and indicate class of licence to be issued.	
13. If applying for a chauffeur's Licence, state name and address of employer	
14. Period for which licence is required	1 year <input type="checkbox"/> 3 years <input type="checkbox"/>

I certify that the information on this form is correct and complete.

Signature of Applicant _____ **Date of Application** _____

OFFICIAL USE ONLY:

Received by:

Name (print): _____ Signature: _____ Date: _____

Captured by:

Name (print): _____ Signature: _____ Date: _____

Document Number _____

Verified by:

Name (print): _____ Signature: _____ Date: _____

