

NOTIFICATION OF MOTORING CONVICTION FORM

1 – APPLICANT DETAILS

a) Mr / Mrs / Miss / Ms / Other. **please specify* b) Surname:

c) Christian / Forenames:

d) Present residential address:

..... Postcode:

e) Date of Birth:

DAY	MONTH	YEAR

f) Telephone No: i. Home:

ii. Business:

iii. Mobile:

g) Please state conviction or caution details below.

Offence	Date of Conviction	Court (<i>where applicable</i>)	Sentence Imposed

h) Were you driving a licensed vehicle at the time of the above offence?

Yes

No

Please detail the circumstances of the above conviction:

2 - CHECKLIST

Your driving licence (*both parts of new style DVLA photocard licence*)

3 - DECLARATION

I declare that the information given by me on this form are true, complete and accurate. I understand that if any information given by me is false, I shall be liable to prosecution and that any licence obtained as a result may be revoked.

Signed: Dated:

If you need any assistance completing this form, please contact Licensing on 01824 706342 for an appointment or to make enquiries.

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OFFICE USE ONLY

No of points received		Total no of points on DVLA licence	
Additional Comments			