

**1. Customer details**

Family name

Given name(s)

Date of birth

 /  /   
Day / Month / Year

Driver licence number

Residential address (must be in NSW)

  
 Postcode

Mailing address (If different from your residential address)

  
 Postcode

Email address

Mobile number

**2. Have you ever been disqualified, prohibited or refused from driving a motor vehicle or riding a motorcycle in NSW or elsewhere?**

No  Yes  Give details

**3. Do you have a disqualification, cancellation, suspension or pending charge against you in NSW or elsewhere or is your licence subject to an appeal for driving, riding or offences?**

No  Yes  Give details

**Please note: If you answer Yes to any question from 4 to 10 you may be required to provide a completed Roads and Maritime medical form. Contact 13 77 88 to obtain a medical form.**

**4. Do you have diabetes?**

No  Yes  Controlled by:

Insulin  (Oral medication (eg tablets)  Diet (medical not required)

**5. Do you have epilepsy?**

No  Yes

**6. Have you ever had attacks or giddiness, blackouts, fainting or other sudden periods of unconsciousness?**

No  Yes

**7. Do you have any medical, physical or mental disabilities which may affect your driving?**

No  Yes  What are they?

**8. Do you regularly use drugs (such as stimulants or drugs of addiction) other than prescription medication, which may affect your driving?**

No  Yes  What are they?

**9. Will you be wearing glasses or contact lenses when driving?**

No  Yes  contact lenses  glasses

**10. Do you have an eye or vision condition that may affect your driving? eg poor visual acuity, monocular vision, double vision, visual field defects, poor night vision.**

No  Yes

**Please note:** Drivers of public passenger vehicles are required to meet the commercial eyesight standards set out in the Assessing Fitness to Drive Guidelines published by Austroads and the National Transport Commission (<http://www.austroads.com.au/drivers-vehicles/assessing-fitness-to-drive>). As the holder of a passenger transport licence code, you will be required to pass an eyesight test at the commercial level on renewal of your driver licence and you will be limited to a 5 year licence term. Prior to your next licence renewal, you should make your own enquiries or consult your GP or optometrist about your ability to meet the required eyesight standard.

**11. Privacy Statement and Disclosure Consent and Declaration**

**Important. Please read the following carefully**

**Privacy.** Roads and Maritime is collecting your personal information and health information in connection with your application for a passenger transport driver licence code and we may retain and use it for driver licensing, motor vehicle, road transport or road safety purposes. We are entitled to obtain your personal and health information under road transport legislation and may refuse your application if you do not provide it. We may disclose your personal information to other driver licensing and vehicle registration agencies, to assess your application, to verify the information you provide and for inquiries about motor accidents. We may disclose your health information to assess your application or to verify it. Otherwise we will not disclose your personal or health information without your consent unless authorised by law. Your personal information will be held by Road and Maritime Services and you can contact us at [www.rms.nsw.gov.au](http://www.rms.nsw.gov.au) to request to access or correct it.

**Consent.** You consent to Roads and Maritime Services exchanging Relevant Information with Relevant Organisations in connection with Roads and Maritime Services and those Relevant Organisations carrying out their obligations and functions under Relevant Legislation. You agree that your consent remains valid so long as you apply for or hold a driver licence with a passenger transport code. "Relevant Information" includes (but is not limited to) charges, convictions, traffic infringements, complaints, suspensions or cancellations of licences and licence details relevant to your eligibility to provide a passenger service or community transport/small vehicle service as a driver. "Relevant legislation" means road transport law and includes (but is not limited to) the *Passenger Transport Act 2014* and the *Point to Point Transport (Taxis and Hire Vehicles) Act 2016*. "Relevant Organisations" include (but are not limited to) booking or taxi service providers, community transport providers or small vehicle service providers, the Point to Point Transport Commissioner, police, the judiciary, and other driver licensing or passenger transport authorities whether or not in NSW.

**Declaration.** You declare that the information on this form is true and complete. Under road transport legislation it is an offence for anyone to attempt to obtain or renew a driver licence by false statement or dishonest means.

Signature

Date

 /  /   
Day / Month / Year

**Office Use - BUNDLE A**

Mailing address checked on DRIVES (if applicable)

Confirm identity - Applicant's signature

**Proof of identity** (must be produced with each visit)

Stand-alone or primary proof

Document number

Passport/Visa - date of issue or E/D

Secondary proof

Secondary proof - date of issue or E/D

POI seen - CSR Signature and Staff number

**Eyesight test/Medical report** (Eyesight test required for licence renewal only)

Pass without glasses or contacts <input type="checkbox"/>	Pass with glasses or contacts <input type="checkbox"/>	Eyesight report <input type="checkbox"/>	Eyesight test given Commercial <input type="checkbox"/>	CSR Signature and Staff number
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**NSW Photo Card**

NSW Photo Card issued  (No application form required)

**Photo Comparison**

No stored image or not requested <input type="checkbox"/>	Faulty <input type="checkbox"/>	Matched <input type="checkbox"/>	Mismatched <input type="checkbox"/>
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**POI Sample Questions completed**

Verified <input type="checkbox"/>	Further checks required (receipt issued) <input type="checkbox"/>
Referee contact	
Unnecessary <input type="checkbox"/>	Applicant's identity confirmed <input type="checkbox"/>
Confirm identity (Applicant's signature)	

**Passenger transport licence code applied?**

Yes  No

**CSR signature**

[Signature Line]	
Staff number	Date
[Staff number]	day / month / year