

Form L. T. V. A.

Form of Application for Authorisation to Drive a Transport Vehicle

(See Rule -7.)

To
The Licensing Authority,
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I apply for an authorisation to drive a transport vehicle within the State of Tamil Nadu. I have
experience in driving motor vehicle for a period ofyears.

I forward herewith the driving licence held by me No.....
District..... issued by the licensing Authority of

Name of applicant
(in block letters or clear script) :

Present Address :
.....
.....

Date :

Signature or thumb-impression of the applicant.

* To be filled in if applicant holds a driving licence.