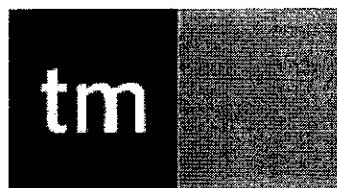


Applikazzjoni għal Liċenzja tas-Sewqan f'Kategorija B Application for a Driving Licence under Category B

Timbru tal-Iskola tas-Sewqan <i>Stamp of Motoring School</i>
DRV 02



Transport Malta

Hornworks Ditch, Floriana FRN 1221, Tel 2556 0000, Fax 2123 1685
 Email info@transport.gov.mt Website www.transport.gov.mt

Dettalji Personali - Personal details

Nru tal-Karta tal-Identità – I.D. Card Number
Titlu (Sinjur/a eċċ.) – Title (Mr/Ms etc.)
Kunjom – Surname
Isem – Name
Numru/Dar – Number/House
Triq – Street
Belt/Raħal – Town/Village
Kodiċi Postali – Post Code
Data u Post tat-Twelid – Date and Place of Birth
Nazzjonalità – Nationality
<input type="checkbox"/> Raġel – Male <input type="checkbox"/> Mara – Female
Numru tat-Telefon – Telephone Number

Dettalji tal- Instructor - Instructor details

(Trid timtela biss jekk l-instructor mhuwiex instructor registrat – To be completed only if the Instructor is a non-registered Instructor)

Isem l-Instructor – Name of Instructor	
Numru tal-Karta tal-Identità – I.D. Card Number	
Numru tal-Vettura – Vehicle No.	
TWISSIJA lill-Applikant - Kull stqarrija falza, rappreżentazzjoni hażina, jew habi ta' fatti materjali fuq din il-formola, jew xi dokument ipprezentat flimkien ma' din l-applikazzjoni jistgħu jwasslu biex jittieħdu proċeduri kriminali.	WARNING to all Applicants- Any false statements, misrepresentation or concealment of material fact on this form or any document presented in support of this application may be grounds for criminal prosecution.

Tista' tapplika għal Kategorija waħda ma' kull formola ta' applikazzjoni - You can only apply for one category per application form.
 Hemm ħlas ta' €23.25 għal Applikazzjoni għal-Liċenzja f'din il-kategorija - There is a payment of €23.25 for the Application for Licence to drive this Category.

Għal liema Kategorija qed tapplika? (iffirma l-għażla tiegħek)
What Category are you applying for? (sign where applicable)

Kategorija Category	Deskrizzjoni Description	Firma tal-Kategorija li għaliha qiegħda ssir l-applikazzjoni Signature of Category being applied for
B1 Minimu ta' età ta' 18 il-sena Minimum 18 years of age	Kwadriċikletti <i>Quadricycles</i>	
B Minimu ta' età ta' 18 il-sena Minimum 18 years of age	<p>Vetturi bil-mutur b'massa massima awtorizzata ta' mhux iżjed minn 3,500kg u maħsuba u mibnija għall-garr ta' mhux aktar minn tmien passiġġieri minbarra s-sewwieq. Vetturi bil-mutur f'din il-kategorija jistgħu jingħaqdu ma' karro li jkollu massa massima awtorizzata li ma tkunx iżjed minn 750kg.</p> <p>Mingħajr preġudizzju għad-dispożizzjonijiet dwar l-approvazzjoni tat-tip tal-vetturi kkonċernati, vetturi bil-mutur f'din il-kategorija jistgħu jingħaqdu ma' karro li jkollu massa massima awtorizzata li tkun iżjed minn 750kg, iżda l-massa massima awtorizzata tal-vettura mgħaqda mal-karro ma tkunx taqbeż 4,250kg. Meta vettura mgħaqda mal-karro taqbeż 3,500kg, hi għandha tkun misjuqa biss minn sewwieq li jkun għadda mit-test ta' hila u mgħiba skont l-Anness V tad-Direttiva..</p> <p>Triċikletti bil-mutur b'qawwa ta' iżjed minn 15kW (sakemm id-detentur tal-liċenzja jkollu għall inqas 21 sena).</p> <p><i>Motor vehicles with a maximum authorised mass not exceeding 3,500 kg and designed and constructed for the carriage of no more than eight passengers in addition to the driver, motor vehicles in this category may be combined with a trailer having a maximum authorised mass which does not exceed 750 kg.</i></p> <p><i>Without prejudice to the provisions of type-approval rules for the vehicles concerned, motor vehicles in this category may be combined with a trailer with a maximum authorised mass exceeding 750 kg, provided that the maximum authorised mass of this combination does not exceed 4,250 kg. Where such a combination exceeds 3,500 kg it shall be driven only after a test of skills and behaviour in accordance with Annex V of the Directive.</i></p> <p><i>Motor tricycles with a power exceeding 15kW (provided that the holder of the licence is at least 21 years of age).</i></p>	
BE Minimu ta' età ta' 18 il-sena Minimum 18 years of age	<p>Mingħajr preġudizzju għad-dispożizzjonijiet dwar l-approvazzjoni tat-tip tal-vetturi kkonċernati, kombinazzjoni ta' vetturi li jikkonsistu f'vettura li tiġbed fil-kategorija B u karro jew semikarro fejn il-massa massima awtorizzata tal-karro jew tas-semikarro ma tkunx iżjed minn 3,500kg.</p> <p><i>Without prejudice to the provisions of type-approval rules for the vehicles concerned, combination of vehicles consisting of a tractor vehicle in category B and a trailer or semi-trailer where the maximum authorised mass of the trailer or semi-trailer does not exceed 3,500 kg.</i></p>	

Noti / Notes

- g.v.w. ifisser il-piż gross tal-vettura - *g.v.w. means the gross vehicle weight*
- It-test tal-prattika jrid isir b'vettura skont il-kategorija li applikajt għaliha hawn fuq – skont il-Legislazzjoni Sussidjarja 65.18 Regolamenti dwar vetturi bil-mutur (liċenzji tas-sewqan) – it-Tielet Skeda (Regolament 26) - *The practical test is to be undertaken according to the category applied for above – this in line with Subsidiary Legislation 65.18 – Motor Vehicles (driving licences) Regulations – Third Schedule (Regulation 26)*
- Tista' tixtri l-għajnuna għat-taħriġ f'forma ta' ktejjeb - kemm bil-Malti u kemm bl-Ingliż li jismu *Highway Code* (€2.30) bi preparazzjoni għall-eżami tat-teorija (li jsir kemm bil-Malti kif ukoll bl-Ingliż) - *You may wish to consider purchasing our training aids – we have a booklet both in Maltese or English named the Highway Code (€2.30) in preparation of your Theory Test (dual language Maltese - English) – these to help assist you in your preparations.*
- Importanti li tavża lill-Awtorità jekk l-applikazzjoni tiegħek hijiex għal vettura ta' tip awtomatiku u mhux manwali – *It is important to inform the Authority if your application is for an Automatic vehicle and not a manual one.*
- Is-sistema tal-punti tapplika għal dawk kollha li tinħarġilhom liċenzja ġdida bi prova għall-ewwel 3 snin. - *A penalty point system is applicable to all new probationary licences issued for the first 3 years.*

Iżjed Informazzjoni Further Information

- Wara din l-applikazzjoni jrid isir l-eżami tat-teorija – irid isir appuntament billi ċċempel fuq 21227190 - 27227190 – It-test jiswa €30.25 (€22.50 f'każ li terġa' toqgħod għall-eżami).

After this application the Theory Test shall need to be done – An appointment for this can be made by calling the Theory test Centre on 21227190 - 27227190 to set an appointment – This costs € 30.25 (€ 22.50 for a re-sit).

- Wara din l-applikazzjoni għandek tiegħu taħriġ ma' Skola tas-Sewqan jew Instructor Privat (teħtieġ assikurazzjoni apposta) li tagħzel int. Dan it-taħroġ għandu jkun immarkat fuq l-iStudent Record Sheet.

Following this application you shall undergo training with your chosen Motoring School or Private Instructor (specific insurance coverage is needed). Such training is to be marked on the Student Record Sheet.

- Meta jitlesta t-taħriġ u wieħed ikun lest jersaq għall-eżami, dan għandu jimla u jibgħat il-formola DRV 20 għall-eżami tal-prattika – din il-formola tingabar kemm mill-uffiċini tagħna f'Hall C, Hornworks Ditch Floriana, mingħand l-iskola tas-Sewqan jew inkella mill-website <http://www.transport.gov.mt/land-transport/driving/obtaining-your-driving-licence>, jew billi ċċempel il-Freephone 80072309 li immedjatament jibagħtulek formola bil-posta d-dar. Għal dan l-eżami wieħed għandu jhallas €23.25.

Once the training is concluded and you are ready to be tested then you shall need to complete and return the DRV 20 form for the Practical Test – the form can be collected from our offices at Hall C Hornworks Ditch Floriana, your Motoring School, or downloaded through our website <http://www.transport.gov.mt/land-transport/driving/obtaining-your-driving-licence> or by call our Freephone on 80072309 who shall immediately mail you an application home. A fee of € 23.25 is applicable for the test.

- Ladarba tgħaddi mill-eżami trid tmur fid-Direttorat għat-Trasport fuq l-Art, Hall C, Hornworks Ditch Floriana, u tipprezenta d-dokument li juri li tkun g[addejt mill-eżami biex tinhariglek il-Liċenzja tas-Sewqan (jew tiżdied magħha l-kategorija relatata). Immedjatament tinhariglek il-Kontroparti u aktar tard tircievi bil-posta l-Kard tal-Liċenzja tas-Sewqan.

Once you pass your test you shall need to come to the Land Transport Directorate, Hall C, Hornworks Ditch Floriana to present your passed test certificate for the issuance of your Driving licence (or inclusion of the relative category). You shall immediately be issued with a Driving Licence Counterpart and shall receive the Driving licence Card home in due course.

Flimkien mal-applikazzjoni tiegħek għal Liċenzja jkollok bżonn Together with your application for a license you require

- Ritratt bil-kulur ta' kwalità tajba, daqs ta' ritratt tal-passaport (dan ir-ritratt irid juri l-wiċċ kollu minn quddiem, mingħajr kappell, elmu jew nuċċali tax-xemx, u fuq sfond ċar). Dan irid jitwaħħal bil-kolla fil-post provdut f'din l-applikazzjoni. Tużax staples jew clips tal-karti.

One good quality coloured passport sized photograph (the photograph must show the full frontal face with no hat, helmet or sunglasses, with a light background). It needs to be glued in this application form. Do not use staples or paper clips.

- Kopja tal-Karta tal-Identità Maltija

Photocopy of your Maltese Identity Card

- Ladarba din l-applikazzjoni tkun proċessata jinhariglek Permess tat-Tagħlim li huwa validu għal 3 snin.

Once this application is processed we will issue you with a Learner permit which is valid for 3 years.

Dikjarazzjonijiet Importanti

Important Declarations

- L-informazzjoni personali mogħtija f'din l-applikazzjoni tiġi pproċessata skont il-provvedimenti tal-Att dwar il-Protezzjoni tad-Data (Kap. 440 tal-Liġijiet ta' Malta) għall-finijiet biss biex tiġi miksuba u tinamm liċenzja tas-sewqan. L-informazzjoni personali tiegħek ma tiġix mgħoddija lil terzi persuni mingħajr il-kunsens espliċitu tiegħek, sakemm dan ma jkunx strettament mitlub mil-liġi. Inti għandek id-dritt għall-aċċess għall-informazzjoni personali tiegħek u kif ukoll id-dritt li tbidel, jew fejn ikun hemm bonn, tħassar l-informazzjoni personali skorretta, li mhix kompluta jew li mhix meħtieġa, u li tkun se tiġi pproċessata minn Transport Malta. Nawtorizza lil Transport Malta biex tipproċessa l-informazzjoni f'din l-applikazzjoni għar-raġunijiet ta' hawn fuq.
The personal information provided in this application form shall be processed in accordance with the provisions of the Data Protection Act (Cap. 440 of the Laws of Malta) and solely processed for the purpose(s) of acquiring and holding a driving licence. Your personal information will not be disclosed to third parties without your express consent unless this will be strictly required by law. You have the right to request access to your personal data as well as the right to rectify and where applicable, erase any inaccurate, incomplete or immaterial personal data processed by Transport Malta. I do hereby authorise Transport Malta to process the data contained in this form for the above-stated purpose(s)."

- Jien hawn taħt niddikjara li jekk tiżviluppali xi kundizzjoni medika wara li jinħareġ dan il-permess għat-Tagħlim tas-Sewqan jien ninforma lid-Direttorat minnufih. *I hereby declare that if I develop a medical condition after the issuance of this Driving Learners' Permit I shall immediately inform the Directorate.*
- Jien hawn taħt niddikjara li m'għandix liċenzja tas-sewqan oħra maħruga f'pajjiż ieħor - *I hereby declare that I do not hold another driving licence issued by another country.*
- Jien hawn taħt niddikjara li jien ilni residenti f'Malta għal mill-inqas 185 gurnata fl-aħħar sena tal-kalendarju - *I declare that I have been a resident of Malta for at least 185 days in the last calendar year*
- Jien hawn taħt niddikjara li qatt ma kelli Liċenzja tas-Sewqan maħruga minn Stat Membru ieħor tal-Unjoni Ewropea (jekk xi darba kellek liċenzja ta' Stat Membru ieħor tal-Unjoni Ewropea, L-Awstralja jew l-Iżvizzera, allura tkun trid tapplika għal Tibdil tal-Liċenzja).

I declare that I have never held a driving licence in any other Member State (if you ever held a driving licence in a Member State or Australia or Switzerland, then you must apply for the Exchange of Driving Licence).

- Jien hawn taħt nikkonferma li f'dawn l-aħħar 3 snin jien kont residenti fl-indirizz(i) indikati hawn taħt, fil-perjodu stipulat.

I confirm that, during the last 3 years, I have resided in the address(es) indicated below, during the period of time stated.

Indirizz/Address 1. _____
Dati/Dates _____

Indirizz/Address 2. _____
Dati/Dates _____

Indirizz/Address 3. _____
Dati/Dates _____

- Jien hawn taħt niddikjara li qatt ma kelli liċenzja tas-sewqan rifjutata, revokata, meħuda jew sospiża minn Stat Membru jew pajjiż terz - *I declare that I never had a driving licence refused, revoked, withdrawn or suspended by another member state or third country.*
- Jien hawn taħt niddikjara li l-istqarrijiet li għamilt u l-informazzjoni li tajt f'din l-applikazzjoni huma korretti u veri. Nifhem li jistgħu jittieħdu proċeduri kriminali kontra tiegħi jekk xi dettalji huma foloz jew jiżgwidaw.
I hereby declare that the statements made and information given in this application are correct and true. I understand that criminal action may be taken against me if any of the details are false or misleading.
- Jekk għandek xi riservi dwar xi waħda mid-dikjarazzjonijiet hawn fuq imsemmija jekk jogħġbok għid hawn taħt, dwar liema u għaliex.
If you have any reservations about any of the declarations mentioned above please advise for which, and why, below.

Waħhal ir-ritratt
hawnhekk
Glue Photo Here

Tużax staples
Do not use staples

Jekk jogħġbok iffirma b'linka sewda fil-kaxxa
Please sign in black ink within the box

Medical Certificate



Applicant's Full Name _____ ID Card Nr _____ Driving Category _____

Applicant's health: *(please refer to your doctor for any explanation of medical terms)*

Have you ever had, or do you currently suffer from any of the following conditions? Yes No

If you have answered 'Yes', please Mark in all the appropriate boxes.

- | | |
|--|--------------------------|
| 1. Diabetes controlled by insulin / Any episodes of hypoglycaemia in the past 12 months | <input type="checkbox"/> |
| 2. Epilepsy | <input type="checkbox"/> |
| 3. Any condition affecting one or both eyes
<i>(Not including colour blindness or short or long sight)</i> | <input type="checkbox"/> |
| 4. Any condition which affects your visual field or acuity
<i>(apart from wear glasses or corrective lenses)</i> | <input type="checkbox"/> |
| 5. Unstable angina (chest pain) | <input type="checkbox"/> |
| 6. Stroke with any symptoms lasting longer than one month | <input type="checkbox"/> |
| 7. Fits or blackouts | <input type="checkbox"/> |
| 8. Any type of brain surgery, severe head injury involving in-patient treatment or brain tumor | <input type="checkbox"/> |
| 9. Any serious arrhythmia or an implanted cardiac pacemaker or defibrillator (ICD) | <input type="checkbox"/> |
| 10. Repeated attacks of sudden disabling giddiness | <input type="checkbox"/> |
| 11. Any other chronic neurological condition including Multiple Sclerosis, Motor Neurone and Huntington's Disease | <input type="checkbox"/> |
| 12. A serious problem with memory or periods of confusion | <input type="checkbox"/> |
| 13. Persistent alcohol misuse or dependence | <input type="checkbox"/> |
| 14. Persistent drug misuse or dependence | <input type="checkbox"/> |
| 15. Serious psychiatric illness or ill health | <input type="checkbox"/> |
| 16. Parkinson's disease | <input type="checkbox"/> |
| 17. Narcolepsy | <input type="checkbox"/> |
| 18. Sleep Apnoea syndrome | <input type="checkbox"/> |
| 19. Any persisting limb problem which needs driving to be restricted to certain types of vehicles or those with adapted controls | <input type="checkbox"/> |
| 20. Severe learning disability | <input type="checkbox"/> |

Have you informed Transport Malta of this condition before? Yes No

Has this condition got worse? Yes No

I declare that, to the best of my knowledge and belief, the above information and any further information I will give to the medical doctor about my Fitness to Drive is true, correct and complete.

I understand that it is a criminal offence to make a false declaration or fail to provide information to get a driving licence and to do so can lead to prosecution and a penalty of imprisonment or fine as stipulated at law.

I authorise my Doctor(s) and Specialist(s) to release reports/medical information about my condition relevant to my Fitness to Drive to Transport Malta.

I authorise Transport Malta to disclose such relevant information as may be necessary to the investigation of my Fitness to Drive to Medical Doctors and Health Authorities.

Applicant's Signature

Date

Medical Doctor to answer the following by ticking the appropriate box

Applicant's Full Name _____ ID Card Nr _____ Driving Category _____

<p>Eyesight * his/her visual acuity for driving purposes only is:</p> <p>Left Right (Snellen) Aided <input type="checkbox"/> Unaided <input type="checkbox"/></p> <p>Any Visual Acuity problems Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any condition affecting Peripheral Vision Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any condition affecting both eyes (not including colour blindness, short or long sight) Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Total loss of sight in one eye Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Diabetes Mellitus Is the patient on Insulin Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any episodes of hypoglycaemia in the past 12 months Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Hearing hears a conversational speech from a distance of metres</p> <p>Aided <input type="checkbox"/> Unaided <input type="checkbox"/></p> <p>Any hearing impairment Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Neurological * Any neurological conditions such as Multiple Sclerosis, Motor Neuron Disease, Parkinson's Disease or Huntington's Disease Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any history of Stroke or Tia Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Epilepsy Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Locomotor Any static handicap Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any progressive condition Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Mental Disorders Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any persistent Alcohol misuse or dependency Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any persistent Drug misuse or dependency Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Cardiovascular Any serious arrhythmia Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any implanted cardiac pacemaker or defibrillator Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any unstable angina Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Chronic Renal Conditions Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Any Organ transplant or artificial implant Yes <input type="checkbox"/> No <input type="checkbox"/></p>

NOTE: The conditions above that are marked with an * may require referral to and certification by another specialist.

Please refer to the list (printed on following page) of Information Codes, Driver (Medical Reasons) and insert hereunder the Code(s) applicable.

If applicable, please tick box and indicate number of years

In relation to a condition noted above, this certificate is valid only for a period of Year(s) and the applicant is to be re-visited and re-certified after that period of time.

If applicable, please tick box:

- Driving is to be restricted to certain types of vehicles with an automatic gearbox.
- Driving to be restricted to certain types of vehicles with adapted controls.

<p>Certification is to be kept pending. Specialist referral has been made for further assessment.</p>	<p>I certify that I have examined the applicant in accordance with the Subsidiary Legislation 65.18 Motor Vehicles (Driving Licences) Regulations, 8th Schedule, and I declare that he/she is considered:</p>	
	<p>FIT TO DRIVE</p>	<p>NOT FIT TO DRIVE</p>
<p>_____</p> <p>Date Doctor's Signature, Stamp and Reg. No</p>	<p>_____</p> <p>Date Doctor's Signature, Stamp and Reg. No</p>	<p>_____</p> <p>Date Doctor's Signature, Stamp and Reg. No</p>

List of Information Codes, Driver (Medical Reasons)

[SUBSIDIARY LEGISLATION 65.18 MOTOR VEHICLES (DRIVING LICENCES) REGULATIONS 7th Schedule]

- 01. Sight correction and/or protection
 - 01.01 Glasses
 - 01.02 Contact lense(s)
 - 01.03 Protective glass
 - 01.04 Opaque lense
 - 01.05 Eye cover
 - 01.06 Glasses or contact lenses

- 02. Hearing aid/communication aid
 - 02.01 Hearing aid for one ear
 - 02.02 Hearing aid for two ears

- 03. Prosthesis/orthosis for the limbs
 - 03.01 Upper limb prosthesis/orthosis
 - 03.02 Lower limb prosthesis/orthosis

- 05. Limited use (subcode use obligatory, driving subject to restrictions for medical reasons)
 - 05.01 Limited to day time journeys (for example: one hour after sunrise and one hour before sunset)
 - 05.02 Limited to journeys within a radius of ... km from holder's place of residence or only inside city/region
 - 05.03 Driving without passengers
 - 05.04 Limited to journeys with a speed not greater than ... km/h
 - 05.05 Driving authorised solely when accompanied by a holder of a driving licence
 - 05.06 Without trailer
 - 05.07 No driving on motorways
 - 05.08 No alcohol