Jamaica

SAVE RESET PRINT

# APPLICATION FOR SUBSTITUTE DRIVER'S LICENCE

**F8**

► ***Please Complete Sections A and B Of This Form***

## Section A – General Information

| 1. Name (Last, First, Middle) | 2. Taxpayer Registration Number (TRN) |
|---|---|
| | |
| **3.** Present Address - (Apt. No., St. No. & Name, Postal Zone, Parish) | **4.** Date of Birth (Year / Month / Day) | **5.** Telephone Number |
| | | |

## Section B - Declaration

I declare that my Driver's Licence has been:

☐ LOST ☐ STOLEN ☐ OTHER (If other, state): ……

I hereby request that a **SUBSTITUTE DRIVER'S LICENCE** be issued on payment of the prescribed fee and undertake to return the original, if recovered. In request of my Licence, the following information is provided:

TYPE OF LICENCE: ☐ PRIVATE ☐ GENERAL ☐ MOTORCYCLE

Licence Number: …… Date of Loss: ……► Year Month Day

Original Place of Issue: …… Original Date of Issue: Year Month Day

Brief Statement of Loss: ……

……

……

_____ Signature of Applicant

_____ Date

## FOR OFFICIAL USE ONLY

Competence Number: …… Competence Date: Year Month Day

_____ Collector of Taxes

_____ Signature of Officer

Reference Number: ……

Our records show **NO JUDICIAL ENDORSEMENT** against the Licencee:

……

of ……

## PARTICULARS OF ANY ENDORSEMENTS (DISQUALIFICATIONS/CONVICTIONS) FROM ISLAND TRAFFIC AUTHORITY

……

……

_____ Director - Island Traffic Authority

_____ Date