Driver License Declaration Form

I [full name in block capitals] declare that the driving license I have produced to you for inspection, details of, which are given below, is a valid license, and I am not disqualified, and have not been disqualified, from driving for any reason.

I further declare that such license is the only driving license issued to me and I have not at any time made application for a duplicate. I will notify my employer immediately in writing:

(i) In the event of any incident or prosecution that might lead to the suspension of my license, including by conviction for driving or motor-related offences, or the development of health problems

(ii) If I become disqualified from driving for any reason

(iii) Of any health or medical or other issue that might reasonably be expected to affect my ability to drive safely, and will provide such information from my medical adviser as my employer may reasonably request.

Driving Licence Number ………………………………………………

Driving Licence Expiry Date ………………………………………………

Signed ………………………………………………

Date ………………………………………………