

INLAND REVENUE DEPARTMENT

PHONE: 784-457-1493

EMAIL: svgird@gov.vc



Inland Revenue Department
Kingstown
St. Vincent and the Grenadines

FIRST SCHEDULE

Form II

(Reg. 41)

FORM OF PARTICULARS TO BE GIVEN BY APPLICANT FOR CONDUCTOR'S PERMIT

The Motor Vehicles and Road Traffic Ordinance, 1940.

1. Full Name of Applicant	
2. Postal Address of Residence of Applicant	
3. State Date of Birth of Applicant	
4. Are you the holder of a Conductor's Permit, or have you at any time previously been the holder of a Conductor's Permit? If so, state number and date of issue.	
5. State particulars of any endorsement on any Conductor's or Driver's Permit which you hold or have previously held.	
6. Have you at any time been disqualified from obtaining a Conductor's or Driver's Permit? If so, give particulars as to the Court by whom, the date on which and the period for which the disqualification was imposed.	

Signature of Applicant:

Date of Application: