

CARRIER'S / Q FORM APPLICATION FORM

RENEWAL

I/R 78

Form Q:

For Departmental use only

THE ROAD TRAFFIC ACT APPLICATION FOR CARRIER'S LICENCE

To the Licensing Authority:

Date received:

Application number:

File reference:

Licence number:

(1) Name in full in Block Capitals I (1) JOHN DOE

(2) Full Postal Address of (2) 119 MAXFIELD AVENUE, KINGSTON 10

In the parish of ST. ANDREW do hereby apply

(3) Delete one not required for the grant of a (3) Public/Private Carrier's Licence (In continuation of (4) Public/Private Carrier's Licence No. 221050) in respect of the Motor Vehicles mentioned in the Schedule hereto and I hereby declare that to the best of my knowledge and belief all the statements in his application and the said Schedule in respect of the said Motor Vehicle given by me are true and correct.

Dated this 1ST Day of MARCH 20 16

J. Doe
Signature of Applicant

* These particulars need not given in the case of an application for a Private Carrier's Licence

1. Where will the Motor Vehicle usually be garaged? **AT THE ABOVE STATED ADDRESS**
- *2. Facilities which the applicant proposes to provide:-
 - (a) Class or description of goods to be carried:
 - (b) Districts in which or places between which the vehicles will normally be used.
- *3. base or centre from which the Motor Vehicle will normally be used.

Applicant's Contact numbers: (876) 929 - 0000

Applicant's Email Address: johndoe41@gmail.com

- (a) Tractors are included
(b) As prescribed for each vehicle

(a) SCHEDULE OF MOTOR VEHICLES FOR WHICH APPLICATIONS MADE FOR A CARRIER'S LICENCE

Reg. No.	Unladen Weight	(b) Maximum Laden Weight	Type of Body	Remarks
CX 1000	2500 KG	5500 KG	PICK UP	