SOVERNMENT	Transport Roads & Maritime Services
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Application for a Passenger Transport Licence Code for NSW Driver Licence Holders

1.	Customer details Family name		Do you regularly use drugs (such as stimulants or drugs of addiction) other than prescription medication, which may affect your driving?
	Given name(s)		
		9.	Will you be wearing glasses or contact lenses when driving?
	Date of birth Driver licence number	9.	No Yes Scottact lenses glasses of contact lenses glasses
	Residential address (must be in NSW)	10.	Do you have an eye or vision condition that may affect your driving? eg poor visual acuity, monocular vision, double vision, visual field defects, poor night vision.
	Postcode		No Yes
	Mailing address (If different from your residential address)		Please note: Drivers of public passenger vehicles are required to meet the commercial eyesight standards set out in the Assessing Fitness to Drive Guidelines published by Austroads and the National Transport Commission (<u>http://www.austroads.com.au/drivers-</u> vehicles/assessing-fitness-to-drive). As the holder of a passenger
	Email address		transport licence code, you will be required to pass an eyesight test at the commercial level on renewal of your driver licence and you will be limited to a 5 year licence term. Prior to your next licence renewal, you should make your own enquiries or consult your GP or optometrist about your ability to meet the required eyesight standard.
	Mobile number	11.	Privacy Statement and Disclosure Consent and Declaration
2.	Have you ever been disqualified, prohibited or refused from driving a motor vehicle or riding a motorcycle in NSW or		Important. Please read the following carefully
3. <i>F</i> 4.	elsewhere? No Yes Give details No Yes Give details Do you have a disqualification, cancellation, suspension or pending charge against you in NSW or elsewhere or is your licence subject to an appeal for driving, riding or offences? No Yes Give details Please note: If you answer Yes to any question from 4 to 10 you may be required to provide a completed Roads and Maritime medical form. Contact 13 77 88 to obtain a medical form. Do you have diabetes? No Yes Ves Controlled by: Insulin (Oral Diet		Privacy. Roads and Maritime is collecting your personal information and health information in connection with your application for a passenger transport driver licence code and we may retain and use it for driver licensing, motor vehicle,road transport or road safety purposes. We are entitled to obtain your personal and health information under road transport legislation and may refuse your application if you do not provide it. We may disclose your personal information to other driver licensing and vehicle registration agencies, to assess your application, to verify the information you provide and for inquiries about motor accidents. We may disclose your health information to assess your application or to verify it. Otherwise we will not disclose your personal or health information without your consent unless authorised by law. Your personal information will be held by Road and Maritime Services and you can contact us at www.rms.nsw.gov.au to request to access or correct it. Consent. You consent to Roads and Maritime Services exchanging Relevant Information with Relevant Organisations in connection with Roads and Maritime Services and functions under Relevant Legislation. You agree that your consent remains valid so long as you apply for or hold a driver licence with a passenger transport code. "Relevant Information" includes (but is not limited to) charges, convictions, traffic infringements, complaints, suspensions or cancellations of licences and licence details relevant to your
5.	medication (medical not (eg tablets) required) Do you have epilepsy?		eligibility to provide a passenger service or community transport/ small vehicle service as a driver. "Relevant legislation" means road transport law and includes (but is not limited to) the Passenger Transport Act 2014 and the Point to Point Transport (Taxis and Hire
~			Vehicles) Act 2016. "Relevant Organisations" include (but are not limited to) booking or taxi service providers, community transport providers or small vehicle service providers, the Point to Point Transport Commissioner, police, the judiciary, and other driver
ь.	Have you ever had attacks or giddiness, blackouts, fainting or other sudden periods of unconsciousness?		licensing or passenger transport authorities whether or not in NSW.
7.	No Yes Do you have any medical, physical or mental disabilities which may affect your driving?		Declaration. You declare that the information on this form is true and complete. Under road transport legislation it is an offence for anyone to attempt to obtain or renew a driver licence by false statement or dishonest means.
	No Yes What are they?		Signature
			Day Month Year

UNCLASSIFIED SENSITIVE: PERSONAL

Office Use - BUNDLE A

Once Use - BUNDLE A
Mailing address checked on DRIVES <i>(if applicable)</i>
Confirm identity - Applicant's signature
Proof of identity (must be produced with each visit)
Stand-alone or primary proof
Document number
Passport/Visa - date of issue or E/D
Secondary proof
Secondary proof - date of issue or E/D
POI seen - CSR Signature and Staff number
Eyesight test/Medical report (Eyesight test required for licence renewal only)
Pass without glasses or contacts or contac
NSW Photo Card Photo Comparison
NSW Photo Card issued (No application form required) No stored image or not requested Faulty Matched Mismatched
POI Sample Questions completed
Verified Further checks required (receipt issued)
Referee contact
Unnecessary Applicant's identity confirmed
Confirm identity (Applicant's signature)
Passenger transport licence code applied?
CSR signature
Staff number Date

day

month

Ι

year