

Road Traffic
Management Corporation

NOTE: This form must be submitted with copies of the Driving Licence and Identity Document

Type of Identification:
(Mark with X)

Traffic Register No.	RSA ID	Foreign ID
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Identification Number:

[illegible]

Nature of person:
(Mark with X)

Male	Female
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Full Names:

[illegible]

Initials and Surname:

[illegible]

Telephone Number:

					-									
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Cell phone Number:

					-									
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Email Address:

[illegible]

Country of Destination:

[illegible]

Driving Licence Number:

[illegible]

Valid Date:

								-								
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Code:

A	B	C	EC	Other
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First Issue Date:

		-			-				
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I, the applicant, declare that all the particulars furnished by me in this form are true and correct.

Signature: _____ Place: _____ Date: _____