



**MINISTRY OF HOME AFFAIRS  
DEPARTMENT OF MOTOR VEHICLES  
TURKS & CAICOS ISLANDS**

**MOTOR VEHICLE (DRIVING LICENSES) REGULATION**

**FORM III**

Regulation 6(1)

**APPLICATION FOR RENEWAL OF DRIVING LICENSE**

Rec. No.....

APPLICANTS'S SURNAME.....

CHRISTIAN NAMES(S).....

ADDRESS .....

DATE OF BIRTH ...../...../.....                      HEIGHT .....FT .....INS.  
  d        m        y

WEIGHT.....COLOR OF EYES .....COLOR OF HAIR .....

DRIVING LICENSE NO. .... TELE. NO. ....

E MAIL ADDRESS .....

**APPLICATION**

I hereby apply for the renewal of my Driving License for motor vehicle

Classes .....

Date of issue ..... Expiring date .....

**NOTE:**            To the best of my knowledge and belief the particulars given on this form  
                                 are correct.  
                                 It is an offence under this ordinance to give particulars that are not correct.

Signature of Applicant .....                      Date:.....

Signature of Director:.....