



# DEPARTMENT OF TRANSPORT

Principality of Hutt River  
via Northampton

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## OFFICE USE ONLY

Licence # D: \_\_\_\_\_

Licence # I: \_\_\_\_\_

Issued: \_\_\_\_\_

Expires: \_\_\_\_\_

## Application For: DOMESTIC / INTERNATIONAL DRIVERS LICENCE

(The Hutt River Transport Act 1997)

### A. INSTRUCTIONS:

1. Please complete the form using block letters.
2. One passport photograph signed by witness on back required.
3. Certified copy of existing Domicile Drivers licence essential.

Please Select for 1 Year

Please Select for 5 Year

### IMPORTANT!

- International Drivers Licence is valid for one year unless your current domicile Driving Licence expires, is suspended or revoked in the meantime.
- Domestic Licence is valid for a period of either one year or 5 years as requested, check box above.
- International Licence in no way diminishes the obligation of the holder to conform strictly to the laws and regulations relating to residents or the exercise of a profession which are in force in each country visited.
- You are advised to carry your Domicile Drivers Licence with your International Drivers Licence whilst travelling.
- A completed application for either Drivers Licence must be accompanied by a copy of the applicant's current domicile Drivers Licence, witnessed passport photograph and the specimen signatures.
- Form **MUST** be written in block letters or typed/printed and **SIGNED CLEARLY TWICE BY APPLICANT!**

### B. PLEASE PROVIDE THE FOLLOWING INFORMATION (IN BLOCK LETTERS)

SURNAME/FAMILY/LAST NAME		GIVEN/FIRST NAMES	
DATE OF BIRTH: <i>Day Month Year</i>	PLACE OF BIRTH: <i>Place Country</i>	NATIONALITY:	
EYE COLOUR:	HAIR COLOUR:	COMPLEXION:	
HEIGHT (cm):	GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female	VISIBLE PECULIARITIES:	
RESIDENTIAL ADDRESS:		POSTAL ADDRESS:	
ORGAN DONOR (Optional) <input type="checkbox"/> YES <input type="checkbox"/> NO	SELECT LICENCE REQUIRED: <input type="checkbox"/> Domestic <input type="checkbox"/> International	BLOOD TYPE/GROUP (Optional) <input type="text"/>	
CLASS/CLASSES LICENCE: <i>(TICK REQUIRED)</i>			
<input type="checkbox"/> (1) Any Motorcycle <input type="checkbox"/> (2) Any Motor Vehicle/Bus (12 Passenger Max) <input type="checkbox"/> (3) Light Truck less than 3500kg (Inc trailer) <input type="checkbox"/> (4) Truck Exceeding 3500kg <input type="checkbox"/> (5) Passenger Bus (Excess 12 Passengers)			

I, THE UNDERSIGNED, DO SOLEMNLY DECLARE AND AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

### APPLICANT:

Signature: (Sign twice) \_\_\_\_\_ Date: \_\_\_\_\_

### WITNESS:

Signature: \_\_\_\_\_ **Print:**  
Name & Address \_\_\_\_\_