



**SARK CONSTABLE  
TRACTOR DRIVING LICENCE APPLICATION FORM**

1. Name
2. Address and contact telephone number
3. Category of licence required:
  - A Provisional
  - B Tractor only
  - C Tractor and trailer
4. Do you need to wear glasses or contact lenses when driving? Yes/No
5. Is there anything wrong with your eyesight e.g. tunnel vision, night blindness?  
Yes/No  
If you answered Yes to the last question, please give details

6. Do you suffer from any other health problem that could affect your ability to drive a tractor safely e.g. epilepsy? Yes/No  
If you answered Yes to the last question, please give details

**Declarations:**

I declare that I am at least 16 years old.

I declare that I have checked the details I have given, which to the best of my knowledge are correct and true.

*I **enclose** a cheque payable to "The Inhabitants of Sark" in the sum of £15 AND [Unless applying for a provisional licence] I **enclose** a copy of my tractor driving test pass certificate*

Signed

Dated