



**SARK CONSTABLE**  
**TRACTOR DRIVING LICENCE RENEWAL FORM**

1. Name
2. Address and contact telephone number
3. Number of current licence
4. 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

Age Declaration:

I declare that I am at least 16 years old

*I enclose a cheque payable to "The Inhabitants of Sark" in the sum of £15*

Signed

Dated