

Driving Licence & Eye Sight Test Declaration

It is an offence for a person to drive on a road, in any vehicle otherwise than in accordance with a licence authorising them to drive it. It is also an offence for a person to cause or permit another person to drive without a valid licence for that vehicle type.

I [Full name in Block Capitals].....

Of [Address].....

Declare that the driving licence and all information including the photo taken is a true and accurate record produced for your inspection. The licence details given below, is a valid licence and I am not disqualified, and have not been disqualified from driving for any reason. I have no pending convictions, endorsements or disqualifications that may result in my licence being revoked or would make my licence invalid. I understand that any deliberate concealment or misstatement may result in the termination of any contract if discovered at a later date.

I further declare that I hold only one driving licence and driver tachograph card issued to me and I have not at any time made an application for a duplicate. I will notify you immediately in writing:

- 1) In the event of any incident or prosecution that might lead to the suspension of my licence, including any convictions relating to driving or motor related offences, or the development of health problems.
- 2) If I become disqualified from driving for any reason.
- 3) Of any health, mental or physical, or any other issue that might reasonably be expected to affect my ability to drive safely, and will provide such information from my medical advisor as you may reasonably request.

Driving Licence Number:

Driving Licence Expiry Date:

Country of Issue:

In accordance with current DVLA D4 medical requirements and Tarmac corporate fitness to work standards. I hereby declare myself fit to drive vehicles on a contract/external haulier basis at the point of last test (as confirmed above) for Tarmac in accordance with my vehicle licensing entitlement.

I have also taken the driver eye sight test and can read a car number plate from 25 metres with / without (delete as appropriate) glasses or contact lenses.

This eye sight test was carried out on date:

By signing this declaration I am confirming both my eyesight and blood pressure meet specified DVLA limits and I agree to notify Tarmac and my employer (where applicable) of any health conditions or disabilities I have that may affect my ability to drive. I declare I have received and understood the driver induction and received the Tarmac Driver handbook.

Signed

Tarmac Authorised Signature

Date