

05084licence



Thank you for allowing 0508 4 Licence to help you through this uncertain and often stressful period. We have prepared a comprehensive questionnaire to assist in the quick processing of your limited driver's licence application. The information you supply in this questionnaire helps us complete the application efficiently – please spend some time on it. Complete as much as possible in the areas that apply to you. If you have any questions please call on us 0508 4 Licence.

*Before you answer any of these questions, please think of this
“Is Public Transport available or an Option” if you answer “No” then carry on if “Yes” contact us...*

1. Your Information				
Full Name:				
Home Address:				
Date of Birth:				
Driver's Licence No:				
Driver's Licence Type:	Full <input type="checkbox"/>	Restricted <input type="checkbox"/>	Learners <input type="checkbox"/>	(If Learners, please contact us as soon as possible)
Phone:	(home)	(mobile)		
E-mail:				
Occupation				

2. Your Work Information	
If you are employed by a Company – please complete this section	
Company Name:	
Company Address:	
Company website, if any:	
Company Phone No:	
Your email address at work:	
What does your Company do?	
What are your daily tasks?	
Do you supervise any employees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Start Time:	Finish Time:
Unconventional Hours: (give description if shift work etc)	
Do you require a work licence to get to and from work?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you need to drive while at work?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your Employer aware of this?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If “No”, we suggest that you call us to discuss your options regarding this.	
If “Yes” we require the full name of the person we can contact regarding your employment.	

Name:			
Position:			
Phone:		Cell:	
Best time to contact them:			

If you own a business and are self-employed – please complete this section			
Company Name:			
Company Address:			
Company website, if any:		Work Phone:	
Your email address at work:			
Is your company a: Limited Liability <input type="checkbox"/> Sole Trader <input type="checkbox"/> Other <input type="checkbox"/>			
What is your company number?			
How long have you been in business?			
What does your Company do?			
What is your role in the company and what duties do you perform?			
Do you have any employees?	Yes <input type="checkbox"/> No <input type="checkbox"/>	How many	
Start Time:	Finish Time:		
Unconventional Hours: <small>(give description if on-call etc)</small>			
Do you require a work licence to get to and from work?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you need to drive while at work?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

3. Personal Information			
(We need to establish your hardships, firstly personal hardships. The Police and Courts need to be shown what you have to pay from your wages or income on a weekly basis. Please answer all of these questions.)			
What is your marital status?	Single <input type="checkbox"/> Married <input type="checkbox"/> In a Relationship <input type="checkbox"/>		
Do you support children?	Yes <input type="checkbox"/> No <input type="checkbox"/>	How many?	
Are you the sole income earner?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
What is your income per week (after tax)	\$		
Per week what is your share of expenses: <small>Check or complete which ever applies in the columns below</small>			
• Mortgage <input type="checkbox"/> Rented or Rental(s) accommodation <input type="checkbox"/> / Board <input type="checkbox"/>	\$	Totals for all	
• Food / Meat / Groceries	\$	Totals for all	
• Household Utilities (Rates / Insurances / Power / Gas / Water)	\$	Totals for all	
• Hire Purchases <input type="checkbox"/> Loans <input type="checkbox"/> Credit Cards <input type="checkbox"/>	\$	Totals for all	
• Petrol	\$		
• Personal Use	\$		
• Savings	\$		
• Fines <small>(from this occasion if paying them off)</small>	\$		
• Child Support	\$		
• Other (please specify)	\$		

4. Limited Licence related questions	
Is this application related to Limited Licence related to:	
Court Disqualification? <input type="checkbox"/>	Demerit Point Suspension? <input type="checkbox"/>
Questions for being Disqualified?	
Have you been to Court?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Which Court did you go to?	
How long were you disqualified for	
Did you receive a fine Yes <input type="checkbox"/> No <input type="checkbox"/>	\$
Do you have any of the Court documents Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you ever appeared in Court for any driving Offences before this?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes' how many times before this? _____ times	
When was the last time(s)? <small>Just use the year e.g 1998</small>	
Questions for being Suspended?	
Have you been to Served a letter of suspension?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes' When	
Who gave you the documents? Police <input type="checkbox"/> Someone visited me <input type="checkbox"/>	
Do you have the documents	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been suspended for exceeding demerits before	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes' how many times before this? _____ times	
If 'Yes' when was the last time? <small>Just use the year e.g 1998</small>	

5. Driving Questions
During this Disqualification / Suspension we need to know what driving you need to do:
<small>Check the correct box or complete which ever applies in the columns below</small>
"I need to drive":
Home to work and back (No work driving) <input type="checkbox"/>
How long does it take to get to / from work
Home to work and while at work, then back home when I have finished work <input type="checkbox"/>
How long does it take to get to / from work
I only drive while at work <input type="checkbox"/>
Explain what vehicles you will be driving during this period? <small>Eg "I drive my car to / from work and a work van during the day" or "I have a work vehicle which I use from home"</small>

Think of your busiest driving day and break down your driving for the day? <small>Eg "it takes me ½ hour to get from home to the yard, I would drive about 3 hours of that day then ½ to 45 minutes to get home" or "I would be behind the wheel for 7 to 8 hours total going between my clients"</small>

We need to know where you need to drive "I drive from home to work, at work I am required to drive between Manakau and North Shore" or "I have clients between Kaitaia and Taupo, I do the northern areas Monday & Tuesday and the rest Wednesday to Friday"

We need to know Year / Make / Model / Colour and Full Regos of ALL vehicles you will expect to drive (If you drive a fleet, then vehicles owned by the employer and if possible colour and sign written)

Once Complete Please fax this to (06) 943 4146 or scan and email it to info@05084Licence.co.nz.