

COMPETENCY DRIVING TEST (OVER 70 YEARS OF AGE)

To: Director of Licensing

From: Public Transport Unit

Date: _____ 2017

Subject: **Driving Examination**

As per "The **Public Passenger Vehicle Regulations, 2014**"

Please collect a fee of **fifty dollars** (\$50.00) from Mr. / Mrs. _____

Public Transport ID # _____ on behalf of Public Transport Unit to perform a driving test for a group _____ license in order to demonstrate their level of competency to operate a public passenger vehicle.

Please send copy **only** if not competent via email cayman.transport@gov.ky.

DVDL OFFICIAL USE ONLY

I _____ A driving examiner appointed by the Director of Vehicle Licensing Department has examined the above names person for competency to drive passengers for hire or reward.

My findings are as follows:

☐ **COMPETENT**

☐ **NOT COMPETENT**

Examining Officer Signature: _____

Date: _____

(Official Stamp)

