Application Form for a Driving Licence D401

Please read accompanying guidance notes before completing this form. Please complete this form in block capitals using a black ballpoint pen. Please place an X in the appropriate boxes e.g. ∞ Please do not photocopy this form as it may reduce its quality and result in your application being delayed or rejected.



National Driver Licence Service
An tSeirbhís Náisiúnta um Cheadúnais Tiomána

	Part 1: Personal De	etails (See Part 1 of accompanying guidance notes)	*Mandatory field
1.	Have you previously	Yes No No	
	If yes, which one?	Learner Permit Driving Licence	
	Driver number* (if	known) (You will find this on field 5 of the paper licence or field 4d on a plastic card licence.)	
2.	Title	Mr Mrs Miss Ms Other (please specify)	
		Name to appear on the licence. Acceptable photo ID must be provided in this name. Refer to list 1 on page 4 of the acceptable photo ID must be provided in this name.	ccompanying guidance notes.
3.	First name(s)*		
4.	Surname *	As it appears on your high contificate	
5.	Full name	As it appears on your birth certificate	
		is changed since your last licence issued please indicate the reason	
		Marriage/Civil partnership Deed Poll Use of Irish name	Divorce/Separation
	Previous names	Proof of address provided must match exactly the address given below. Please refer to list 2 on page 4	
7.	Address line 1*		
	Address line 2		
	Town*		<u></u>
	County/City*	Eircode	Official Use
8.	Date of birth*		
		Day Month Year	
9. Gender*		Male Female	
10. PPS number*		Original proof of PPS number must also be provided. See I	ist 3 on page 4 of the guidance notes.
		If born in Ireland, please state County. If born outside of Ireland, please state Country.	
11. Place of birth*			
12	. Mobile no.*	Landline	
	Fmail address*		

The NDLS will use these contact details to contact you in the event of issues with your application, dispatch of your licence and future renewal reminders.

Part 2: l	Licence Deta	ils (See Part 2	of accompany	ing guidance n	otes)			*Mandat	ory field
13. Application type*: Renewal of driving licence. Please see option 1 of checklist Personal detail change. First time driving licence. Please see option 2 of checklist Personal detail change. Replace a lost or stolen licence. Replace a damaged licence.						icence.			
		e option 4 of check ge of foreign		Other(Rea	otion 5 of checklis	st	Please se	e option 6 of chec	Klist
	Please see	option 7 of check	klist						
		re the catego ories please refer		ries that you	wish to app	ly for.			
Group 1 Categories	Required please tick	Notes	Group 1 Categories	Required please tick	Group 2 Categories	Required please tick	Notes	Group 2 Categories	Required please tick
♂ AM		Place refer to	В		C		Please note. All applications for group 2 categories must be	D	
3		Please refer to accompanying guidance					accompanied by a completed medical report		
A1		notes in relation to	BE		CE —		dated within three months	DE	
₹		IBT and					of application. Please also refer	-	
A2		application - requirements	W		C1		to the accompanying	D1	
♂					C1E		guidance notes in relation to CPC	D1E	
							requirements		
15*. On receipt of this driving licence, will you hold a licence issued by another country? Yes No If 'Yes', please provide details below: Issuing country Driving licence no.									
16. If your licence was lost or stolen please sign the declaration below and get the declaration witnessed and stamped at your local garda station. Please note if you find or get your old licence back after applying for a replacement, the old licence will no longer be valid.									
I declare my licence lost/stolen (circle as appropriate) GARDA DECLARATION GARDA DECLARATION									
Signature of applicant Garda Station						n			
I certify	that the app	licant has de	clared his/h	er licence lo	st/stolen.	_		Stamp	
Name of garda									
Signature of garda									
Part 3: Exchanging a Licence (See Part 3 of accompanying guidance notes)									
by exchanging a licence from another country? Yes No									
If 'Yes', please state the country where the original licence was obtained:									
18. Is the licence you are exchanging, suspended, withdrawn, cancelled or are you disqualified? (If yes, refer to Q18 on page 1 of guidance notes and www.ndls.ie for further information) Yes No									
19. I took up normal residence in Ireland on Part 4: Organ Donation (See Part 4 of accompanying guidance notes)									
		x provided if ye an organ do		ke code 115	to appear or	n your drivin	g licence ind	icating	

March 2020 Page 2 www.ndls.ie

Part 5: Driver Fitness (See Part 5 of accompa	anying guidance no	tes)	*Mandatory field		
If you answer 'Yes' to any of the questions below 22 to 42 or 4	43(c), you will also be	required to submit a medical report dated within three	ee months of application date		
21.* Do you need to wear glasses or lenses for driving? Yes (If yes Code 01 will be added to your lice)		31. * A serious problem with memory or periods of confusion ³ 32. *Persistent alcohol misuse	Yes No		
If in the past you answered 'Yes' to this o	•	or dependency	Yes No		
and are now answering 'No' you must procurrent eyesight report with your applications.		33.* Persistent drug misuse or dependency	Yes No		
Health and Fitness		34. *Serious psychiatric illness or men health problems ³	tal No No		
Have you ever had, or do you currently s any of the following conditions?	uffer from,	35.* Parkinson's disease	Yes No		
22.* Diabetes treated by insulin or managed which carry a risk of inducing hypoglycae	emia eg.	36. * Sleep Apnoea syndrome	Yes No		
sulphonylureas. (Ask your doctor whethe sulphonylureas or other medications wh		37. * Narcolepsy	Yes No		
of inducing hypoglycaemia.) No need to managed by diet alone or only by	tell us if	38. * Any condition affecting your			
medications which do not carry		peripheral vision	Yes No		
a risk of inducing hypoglycaemia. Yes	No L	39. * Total loss of sight in one eye	Yes No		
23.* Epilepsy Yes	No	40. * Any condition affecting both eyes			
24.* Stroke or TIAs ¹ with any associated symptoms lasting longer	\Box . \Box	you only have one eye (not includ colour blindness or short or long sight)	ing Yes No No		
than one month Yes	No No	41. *A serious hearing deficiency whic			
25.* Fits or blackouts Yes	No	has worsened since your last	Yes No No		
26.* Any type of brain surgery, brain abscess injury involving in-patient treatment	or severe head	application/renewal			
or brain tumour or spinal injury	No I	42. *Severe learning disability ³	Yes No		
or spinal tumour Yes	\neg	43. *(a) Any persistent problems with			
27. * An implanted cardiac pacemaker Yes	No	arms or legs which restricts your driving to an automatic vehicle	Yes No		
28.* An implanted cardiac defibrillator (ICD) ² Yes	No No	43.* (b) Any persistent problems with arms or legs which restricts your			
29.* Repeated attacks of sudden disabling dizziness Yes	No No	driving to an adapted vehicle 43. *(c) If you have ticked yes	Yes No		
30.* Any other chronic neurological condition as multiple sclerosis, motor neurone disease or huntington's disease Yes		to 43(a) or 43(b) has your condition deteriorated since your last application/renewal.			
disease or huntington's disease Yes No application/renewal. Yes No ¹A transient ischemic attack (TIA) is an event with stroke symptoms that lasts less than 24 hours before disappearing (sometimes called a mini-stroke). While TIAs generally do not cause permanent brain damage, they are a serious warning sign of stroke. ²An Implantable Cardioverter Defibrillator (ICD) is an electronic device which monitors your heart continuously. The ICD is programmed to detect abnormally fast or slow heart rhythms. ³If in doubt, please consult your family doctor. Certain additional information, restrictions or conditions to be fulfilled by the driver relating to the holding of a driving licence may be noted on a licence in coded format. Further information regarding the codes is set out in the explanatory letter issued with your licence and at www.ndls.ie					
Part 6: Declaration by Applicant (See Part	6 of accompanying	guidance notes)	*Mandatory field		
44.* I understand that (i) in accordance with a driving licence whilst disqualified in Ireland, disqualification in Ireland) and (ii) it is an offer provide false or misleading information in sup and that (ii) I am not currently disqualified (wi EEA or a recognised state.	the EU/EEA or a nce under section port of my applic	recognised state, (with the exception o n 115 of the Road Traffic Act 1961, as am cation. I declare that (i) Ireland is my no	f a penalty point ended, to knowingly rmal place of residence		
THIS DECLARATION MUST BE SIGNED BY	Y THE PERSON T	O WHOM THE DRIVING LICENCE IS TO B	E ISSUED		
Applicant's signature	akto ak a k	Day Mon	th Year		
(Please keep signature wi	unn the box)				

Application Checklist for Driving Licence

You must apply in person at any NDLS centre. You may book an appointment at www.ndls.ie

Option 1 - For all applications for driving licences you must si	appty,
 Application form for driving licence D401 (fully completed) Current/ most recent driving licence/learner permit If you do not have your most recent licence you must paa completed lost licence declaration (question 16 on D401) NDLS medical form (dated within three months) if requevalue evidence of IBT if required (see page 3 of guidance notes) Evidence of CPC if required (see page 3 of guidance notes) Evidence of PPS number (list 3 on page 4 of guidance notes) If the address has changed since your last learner permits was issued, you must provide evidence of new address Photographic ID (see list 1 on page 4 of guidance notes) Evidence of residency entitlement (see page 2 of guidance notes) Relevant fee (see page 2 of guidance notes) Your photograph and signature will be captured at the The following additional inform 	nit/driving licence (see list 2 on page 4 of guidance notes, must be dated within 6 months) es and also see list 4 on page 4 of guidance notes)
Option 2 - Applying for your first driving licence	Option 7 - Exchange a foreign licence from EU/EEA or a recognised state
 Cert of competency (dated within 2 years) Current learner permit Option 3 - Adding a category Cert of Competency (dated within 2 years) Current learner permit Current driving licence 	 Evidence of residency entitlement (see list 4 on page 4 of guidance notes) Your current driving licence (please note, if your licence does not have a category start date you will need to provide an original Letter of Entitlement / Driver Statement from your relevant authority) If you do not have your licence you will need to
Option 4 - Change of personal details	present an original Letter of Entitlement/ Driver
 Evidence of name change if name is changing (page 1, Q6 of guidance notes) Evidence of new address (dated within 6 months) if address is changing (see list 2 on guidance notes) A completed NDLS medical form (dated within three 	Statement from the appropriate licencing authority and complete the lost licence declaration (see question 16 on application form) • If your licence is from an EU/EEA member state and is expired for less than 10 years, it must be accompanied by an original Letter of Entitlement/
months) if your medical details have changed (see page 3 of guidance notes)	 Driver Statement from your relevant authority If your licence is from a recognised state and is
Option 5 - Replace a lost or stolen licence	expired for less than one year, it must be
A completed lost licence declaration (see question 16 of application form)	accompanied by an original Letter of Entitlement/ Driver Statement from your relevant authority • If your licence is from a recognised state you
Option 6 – Replace a damaged licence	 must present an eyesight report form D502 Certified translations are required for all Letter of
 Photographic ID (see list 1 on page 4 of guidance notes) Damaged driving licence 	Entitlement/Driver Statements which are not in English or Irish

FROM 9.00AM - 2.00PM. VISIT WWW.NDLS.IE FOR THE MAP AND ADDRESS OF YOUR NEAREST CENTRE.

Data Protection

The RSA will treat all information and personal data you supply as confidential. The information requested on this form is necessary for the purposes of processing your application for a learner permit/driving licence. The information provided in your application will be processed by the RSA and/or its agents solely for the purposes of processing your application, carrying out our obligations, providing services to you and managing our relationship with you.

The RSA may disclose personal data internally and to its agents, contractors and service providers to the extent reasonably required for the purposes described above. Such data may also be shared with other entities but only as permitted by law. Personal data may be subject to disclosure under section 60 of the Finance Act 1993 (No. 13 of 1993) as amended by section 86 of the Finance Act 1994 (No. 13 of 1994) and regulations made thereunder. Public Service Identity data provided by you may be used to maintain/authenticate your Public Service Identity, under section 262(s) of the Social Welfare Consolidation Act - 2005 (as amended). Public Service Identity data may only be shared with other public bodies under this provision.

The RSA will process your details in accordance with its obligations under the Data Protection Acts and Regulation (EU) 2016/679 General Data Protection Regulation (GDPR). This includes taking all reasonable steps (including appropriate technical and organisational security measures) to protect personal data. An electronic version of all information contained in this application may be retained for a period of at least 20 years

You have the following rights, in certain circumstances and subject to certain restrictions, in relation to your Personal Data; The right to receive your Personal Data; The right to object to the processing of your Personal Data; The right to receive your Personal Data; The right to object to the processing of your Personal Data; The right to require us to transmit that data to another control

If you wish to avail of any of these rights, please contact the Data Protection Officer at Road Safety Authority, Moy Valley Business Park, Primrose Hill, Ballina, Co. Mayo F26 V6E4 or via email to dataprotection@rsa.ie. Your request will be dealt with without undue delay and in any event within one month of receipt of the request.