

**APPLICATION FOR RETURN OF SUSPENDED DRIVING LICENCE / PrDP /  
OPERATOR CARD – AARTO 23**

**INSTRUCTIONS FOR COMPLETION OF THE FORM**

- a. This form must be completed in black ink and submitted in person at the Issuing Authority in the area where the infringer resides and to which the Driving licence/PrDP or Operator card was surrendered during the suspension period.
- b. This form may also be electronically obtained, completed and printed at the following Internet website: **www.aarto.co.za**
- c. Individuals need not complete the first two lines of Part A. Organisations must provide the details of the registration number of the organisation (eg CC, company or trust registration number) and the details of a representative (Surname, First names, ID number, cell, email, etc.) who must sign the form on its behalf.



**PART A – PERSONAL PARTICULARS**

Name of organisation: _____		Registration number: _____	
Type of organisation: <input type="checkbox"/> Company <input type="checkbox"/> CC <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____			
Surname: _____		Tel (home): (____) _____	
First names: _____		Tel (work): (____) _____	
Initials: _____ Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Fax: (____) _____	
Date of birth (YYYY/MM/DD): ____/____/____		Cell: _____	
ID Type: <input type="checkbox"/> RSA <input type="checkbox"/> Passport <input type="checkbox"/> Foreign ID <input type="checkbox"/> Driving Licence		Email: _____	
ID number: _____		Employer name: _____	
Country of issue: _____		Employer address: _____	
Licence code: <input type="checkbox"/> A1 <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C1 <input type="checkbox"/> C <input type="checkbox"/> EB <input type="checkbox"/> EC1 <input type="checkbox"/> EC			
<input type="checkbox"/> None <input type="checkbox"/> Foreign code: _____			
Learner code: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3			
PrDP code: <input type="checkbox"/> Goods <input type="checkbox"/> Passengers <input type="checkbox"/> Dangerous			
Street address: _____			
Postal address: _____			
Code: _____			

**MOTOR VEHICLE PARTICULARS**

Vehicle licence: _____
Licence disc no: _____
Operator card no: _____
Vehicle description (type): _____
Vehicle GVM: _____ kg
Make: _____
Series (model): _____
Colour: _____

**PART B – DL/PrDP/OPERATOR CARD PARTICULARS**

Driving licence / Operator card no: _____
Suspension period (YYYY/MM/DD): ____/____/____ to ____/____/____
Issuing Authority surrendered to: _____
Receipt of surrender of DL or Operator card: <input type="checkbox"/> Attached <input type="checkbox"/> Not attached

**PART C – DECLARATION**

I declare that:

(a) the suspension period has lapsed and that I am not subject to a further period of suspension or cancellation of my DL/PrDP or Operator card.

(b) the above particulars are true and correct and I realise that a false declaration is punishable by a fine or imprisonment or both.

Signature: \_\_\_\_\_ Date (YYYY/MM/DD): \_\_\_\_/\_\_\_\_/\_\_\_\_

**PART D – OFFICE USE**

DL / PrDP or Operator card handed to its holder: <input type="checkbox"/> Yes <input type="checkbox"/> No	
ID verified: <input type="checkbox"/> RSA <input type="checkbox"/> Passport <input type="checkbox"/> Foreign (of representative in the case of an organisation)	
Officer name: _____	
Infrastructure no: _____	
Date (YYYY/MM/DD): ____/____/____	
Signature of officer: _____	
	<b>Signed by infringer:</b>
	I acknowledge receipt of the Driving licence/PrDP or Operator card identified above.
	Signature: _____