MEDICAL REPORT

FORM D.501

FOR DRIVER LICENSING PURPOSES

DECLARATION BY APPLICANT

(to be signed by the applicant in the presence of a registered medical practitioner)

I, the undersigned, wish to undergo a medical examination for the purposes of obtaining a provisional licence/driving licence under the terms of the provisions of the Road Traffic (Licensing of Drivers) Regulations, 1999-2001 for the following licence categories: (tick as appropriate √)

M ☐ A1 ☐ A ☐ B ☐ EB ☐ W ☐ C1 ☐ C ☐ EC1 ☐ EC ☐ D1 ☐ D ☐ ED1 ☐ ED ☐

Signature: _____

Name and Address of Applicant in BLOCK letters please

Date of Birth

Day Month Year

THIS REPORT MUST BE SUBMITTED TO A LICENSING AUTHORITY WITH AN APPLICATION FOR A DRIVING LICENCE OR A PROVISIONAL LICENCE WITHIN ONE MONTH OF ITS COMPLETION BY A REGISTERED MEDICAL PRACTITIONER

MEDICAL REPORT

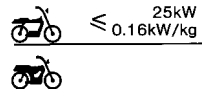
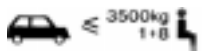
(to be completed by a registered medical practitioner)

I, the undersigned registered medical practitioner, hereby report that:-

- the applicant has signed the above declaration in my presence
- I have examined the applicant by reference to the relevant aspects and the minimum standards of physical and mental fitness prescribed in the Road Traffic (Licensing of Drivers) Regulations, 1999-2001

My opinion as to the applicant's fitness to drive is as follows:-

the applicant is fit to drive vehicles of the following categories for the period(s) indicated.

Licence Category		Description of Vehicle	For 1 year	For 3 years	For 10 years	Medically unfit to drive
M		Moped	☐	☐	☐	☐
A1		Motorcycle up to 125 cc	☐	☐	☐	☐
A		Motorcycle over 125 cc	☐	☐	☐	☐
B		Vehicle up to 3500 kg, max. 8 passengers	☐	☐	☐	☐
EB		Car and trailer	☐	☐	☐	☐
W		Tractors and work vehicles	☐	☐	☐	☐

Licence Category	Description of Vehicle	For 1 year	For 3 years	For 10 years	Medically Unfit to drive
C1 	Small truck - less than 7,500 kg	☐	☐	☐	☐
C 	Large truck - over 3,500 kg	☐	☐	☐	☐
EC1 	Small truck and trailer - no more than 12,000 Kg	☐	☐	☐	☐
EC 	Large truck and trailer	☐	☐	☐	☐
D1 	Small bus - max. 16 passengers	☐	☐	☐	☐
D 	Large bus - more than 8 passengers	☐	☐	☐	☐
ED1 	Small bus and trailer - no more than 12,000 kg	☐	☐	☐	☐
ED 	Large bus and trailer	☐	☐	☐	☐

- the applicant has a physical disability which requires that adaptations be made to a vehicle to meet the requirements of his/her disability — Yes ☐ No ☐
- the applicant has had a limb prosthesis/orthesis — Yes ☐ No ☐
- the applicant needs to wear corrective lenses while driving — Yes ☐ No ☐
- the applicant's fitness to drive does not appear to need review — at all* ☐

* *This box cannot be ticked if the applicant is applying for a licence incorporating entitlement to drive buses or trucks +/- trailer i.e. vehicles of categories C1, C, D1, D, EC1, EC, ED1 or ED.*

NB *Applicants over 70 years of age can only be certified as being fit to drive for either 3 years or 1 year*

Signature _____

Date of Medical Examination: ☐☐☐☐☐☐☐☐

Day Month Year

Telephone Number ☐

Stamp of
Registered Medical Practitioner