Lighthouse Christian Church

SC056 Approved Driver Application

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| Personal Information | | | | |
| Name of Applicant |  | | | |
| Contact Phone No. |  | **Email** | |  |
| Drivers Licence Number: |  | **Renewal Date:** | |  |
| Date Of Issue: |  | **No. of years licence held?** | |  |
| List type of vehicles licensed to drive (car, truck, bus, etc.) | | |  | |
| Are there any restrictions or endorsements on your license, if so please supply details? | | |  | |
| Provide details of any vehicle accidents in which you have been involved as a driver in the past five years.\*\* | | |  | |
| Give details of any traffic offences you have been convicted of in the past five years.  (Excluding parking offences)\*\* | | |  | |

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| In the case of using your private vehicle: | |
| Who is the registered owner of the vehicle? |  |
| Is the vehicle registration current? |  |
| Is the vehicle insured?  (If so, please name your insurance company and level of cover) |  |

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| All approved drivers using private vehicles must have insurance coverage.  Please attach a photocopy of current driver’s license to this completed form.  I confirm that the information I have supplied on this form is true and correct to the best of my knowledge.  \*\* If any of these details change, I agree to notify LIGHTHOUSE CHRISTIAN CHURCH as soon as possible, with the relevant information \*\* | | | |
| Applicant Signature |  | **Date:** |  |

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| Application Outcome | | | |
| Application received on: |  | | |
| Application Processed by: |  | **Role:** |  |
| Outcome | * Application Approved | * Application Denied | |
| Signature |  | | |