

- the use of the test vehicle for the purposes of the test is fully covered by a valid policy of insurance which satisfies the requirements of the relevant legislation.
- I normally live/have lived in the UK for at least 185 days in the last 12 months (except taxi/private hire). See note 30.

Signed

0113 T

Candidate: **Mr GAR-I BARNES** S D/C

Application Ref. **355 390 840 111**

Date **05/01/16** Time **12:38** Dr./No. **81002**

DTC Code / Authority **BEFFEL** Reg. No. **WJ65E7**

Examiner: **M. CAZZO**

Cat. Type **B** Auto Ext

Instructor Reg **330272** Instructor Cert Sup ADI Int Other

		Total	S	D			Total	S	D	Total
Eyesight					13 Move off	safety				23 Positioning
H/Code / Safety						control				normal driving
Controlled stop					14 Use of mirrors- M/C	signalling				lane discipline
Reverse / Left reverse with filter	control				rear obs	change direction				24 Pedestrian crossings
Reverse/Right	control					change speed				25 Position / normal stops
Reverse/Left	control				15 Signals	necessary				26 Awareness / planning
Reverse/Right	control					correctly				27 Ancillary controls
Reverse/Left	control				16 Clearance / obstructions					28 Spare 1
Reverse/Right	control				17 Response to signs / signals	traffic signs				29 Spare 2
Reverse/Left	control					road markings				30 Spare 3
Reverse/Right	control					traffic lights				31 Spare 4
Reverse/Left	control				18 Use of speed					32 Spare 5
Reverse/Right	control					traffic controllers				33 Wheelchair
Reverse/Left	control				19 Following distance					Pass
Reverse/Right	control				20 Progress	appropriate speed				Fail
Reverse/Left	control					undue hesitation				None
Reverse/Right	control				21 Junctions	approach speed				Total Faults
Reverse/Left	control					observation				ETA
Reverse/Right	control					turning right				V
Reverse/Left	control					turning left				P
Reverse/Right	control					cutting corners				D255
Reverse/Left	control				22 Judgement	overtaking				
Reverse/Right	control					meeting				
Reverse/Left	control					crossing				
Reverse/Right	control									

I acknowledge receipt of Pass Certificate Number: **77620322** Licence rec Yes

Wheelchair Cert. No: COA No

There has been no change to my health: see note 29 overleaf

Signed