

FEDERATION OF ST. CHRISTOPHER AND NEVIS LICENCING AUTHORITY

INSTRUCTIONS FOR COMPLETING FORM DLO-001

RENEWAL OF DRIVERS LICENCE FOR PERSONS RESIDING OUTSIDE OF SAINT CHRISTOPHER AND NEVIS



This application is intended for individuals residing outside of the Federation of Saint Christopher and Nevis. Complete all of the sections indicated in the Instructions section. Failure to complete all sections in their entirety can delay the renewal process.

An individual cannot renew their licence by this method if more than five years have passed since the expiration of the last licence renewed through the normal channel. An individual cannot renew their licence by this method if the renewal will extend the licence period beyond ten years since the expiration of the last licence renewed through the normal channel. An individual cannot renew their licence more than three times using this method of renewal.

BE AWARE that a person who makes a false declaration commits an offence under Section 5 of the Perjury Act, 2005 of the laws of Saint Christopher and Nevis and that person is liable to imprisonment for a term of seven (7) years or to a fine of thirty-thousand (\$ 30,000.00) dollars.

INSTRUCTIONS

Sections 1, 2, 3 and 4 are mandatory and must be completed in their entirety. Section 5 and 6 must be completed if another individual is submitting this application on the applicants behalf. Section 7 will be used by the Licencing Authority. Attach a passport sized picture in the space provided.

The fee for renewal of your licence is 187.50 EC or 70.00 USD. All overseas payments must be made by Managers Cheque or International Money Order in (USD), payable to the Accountant General. Allow for a period of up to six (6) weeks for an overseas cheque to clear. **DO NOT SEND CASH.** When submitting an application from overseas, this must be done using a courier service (Fedex, UPS, DHL ...) with return prepaid.

ITEMS REQUIRED

- 1 Notarized copies of the page(s) of your valid passport which contains your passport number, photograph, name, date and place of birth and the expiration date of the passport. A notarized copy of a valid Government-Issued identification (Driver Licence, National Identification card,
- 2 Your expired driver licence must be submitted with this application.
- 3 Your signature in black, using a fine point writing marker, fully contained within the box provided at the bottom
- 4 Signature, date and stamp of a notary public.

If the application is approved you will be contacted by the licencing authority to submit a digital photo in .jpg format (not scanned, but directly from a digital source). This photo should be taken full face, including only the shoulders, neck and head. Hats, caps or any object that conceals the head or face or any part of either must be removed. Photographs not conforming to these rules will be rejected. The background of the picture must be solid white and clothing must be a contrasting colour. Please submit an e-mail address when completing this application. In any electronic correspondence to the Departments, identify yourself within the correspondence by giving your **FULL NAME** and **DATE OF BIRTH** and current **DRIVER LICENCE NUMBER**.

SECTION 4 - TO BE COMPLETED BY THE NOTARY PUBLIC

The foregoing instrument was acknowledged before me this

<i>DAY</i>	<i>MONTH</i>	<i>YEAR</i>

by
NAME OF APPLICANT

who is personally known to me or satisfactorily proven to be the person who executed it for the purpose therein contained.

NAME OF NOTARY PUBLIC

SIGNATURE OF NOTARY PUBLIC

STATE OF:

COUNTRY:

MY COMMISSION EXPIRES ON
DAY / MONTH / YEAR

SEAL OF NOTARY PUBLIC

SECTION 5 - TO BE COMPLETED BY INDIVIDUAL MAKING REQUEST ON BEHALF OF APPLICANT

I OF
NAME OF PERSON MAKING REQUEST *ADDRESS OF PERSON MAKING REQUEST*

DO HEREBY DECLARE THAT THE APPLICANT IS KNOWN TO ME
NAME OF THE APPLICANT

AND I AM PRESENTING THIS APPLICATION IN PERSON ON HIS/HER BEHALF.

SECTION 6 - TO BE COMPLETED BY THE APPLICANT

I OF
NAME OF THE APPLICANT *ADDRESS OF OF THE APPLICANT*

DO HEREBY AUTHORISE TO RENEW AND COLLECT A DRIVER
NAME OF PERSON MAKING REQUEST
LICENCE ON MY BEHALF.

SECTION 7 - TO BE COMPLETED BY ST CHRISTOPHER AND NEVIS LICENCING AUTHORITY

DRIVER LICENCE NO.:

LICENCE TYPE:

LICENCE CLASS:

Licence Officer

DAY / MONTH / YEAR

PROCESSING

IDENTIFICATION TYPE: NUMBER: EXPIRES:

IDENTIFICATION TYPE: NUMBER: EXPIRES:

TAXPAYER NO.:

LICENCE TYPE AUTOMATIC: STANDARD: CLASS:

ISSUED: DAY / MONTH / YEAR

EXPIRES: DAY / MONTH / YEAR

ENTERED BY:

DAY / MONTH / YEAR

PRINTED BY:

DAY / MONTH / YEAR

VERIFIED BY:

DAY / MONTH / YEAR