**Licensing** **Department** **Morecambe** **Town** **Hall** **Marine** **Road** **East** **Morecambe**

**LA4** **5AF**

**Medical** **Fitness** **form – to be completed as part of the D4 medical examination**

As part of the D4 medical your Doctor or Medical Practitioner must complete the Statement of Fitness form as part of your medical examination.

The Statement of Fitness form can only be completed by a Medical Practitioner or Doctor that you have been registered with for the last twelve months, they must confirm that they have access to your medical records and that you meet the DVLA Group 2 Medical Standards.

[www.gov.uk/government/publications/at-a-glance.](http://www.gov.uk/government/publications/at-a-glance)

|  |  |  |
| --- | --- | --- |
| Doctors full name: |  | |
| Patients full name: |  | |
| Patients date of birth: |  | |
| Patients address: |  | |
| Medical condition(s): |  | |
| Treatment(s): |  | |
| Additional information (please continue on additional sheet if necessary and please number all additional sheets and insert number of sheets here): |  | |
| In assessing the medical fitness to hold a licence to drive a private hire/hackney carriage vehicle, I have applied the current best practise advice contained in the booklet “Fitness to Drive”: I understand that this recommends that the Group 2 medical standards applied by DVLA in relation to bus and lorry drivers should also be applied by Local Authorities to taxi drivers. I confirm that for the patient detailed above I have access to their medical records and can confirm that the patient is medically fit to undertake the duties of a hackney carriage/private hire driver and to drive a hackney carriage/private hire vehicle and meets the requirement of the DVLA Group 2 Medical Standards and I am aware that this licence can be issued for a period of up to three years.  Doctors signature: Date: | | |
| Practice address or practice stamp: | |  |