

Form: VTC1



APPLICATION FOR REPLACEMENT ADR VOCATIONAL TRAINING CERTIFICATE

Driver Licence No: (from current UK Driving Licence)												
DATE OF BIRTH:												
SURNAME:												
OTHER NAMES:												
ADDRESS:												
POST CODE:												
TELEPHONE NUMBER:												

Reason for Replacement (give reasons for damage or loss)					
Damaged ADR Vocational Training Certificate attached	Yes		No		
Fee of £10.00 enclosed	Yes		No		
I declare that I have checked the details I have given and to the best of my knowledge believe they are correct and I apply for a replacement ADR Vocational Training Certificate.					
Signed:			Date:		
All cheques should be made payable to Scottish Qualifications Authority and returned along with this form to the following address;					
ADR Team – Testing Services, Scottish Qualifications Authority, Optima Building, 58 Robertson Street, Glasgow G2 8DQ					

For Office Use Only

Date Received:		Fee Enclosed:	
Checked by:		Sent to DVLA	