

Request for Reconsideration of the Application of Restriction(s) 25, 26, 28 and 51*

Note: Restrictions are applied to Driver's Licences when it has been determined modifications are required for the licence holder to safely operate a vehicle. In most instances, a road test re-examination will be required in order to demonstrate that the restriction(s) is not needed. *Restriction 51 is only eligible for reconsideration if it is related to Driver Medical Fitness.

Surname: (please print clearly)	Given Name(s):				
Address:	Province:	Postal Code:			
BC Driver's Licence No.:					
Restriction(s) you are requesting to be reconsidered:					
Reasons for Request for Reconsideration: (Please provide reasons that support your request for reconsideration of the application of any of these restrictions to your driver's licence. Attach added pages if needed).					
Signature: Date (yyyy/mm/dd):					
	Additional numbe	er of pages:			

Mail application to:
ROADSAFETYBC
DRIVER MEDICAL FITNESS PROGRAM
PO BOX 9254 STN PROV GOVT
VICTORIA BC, V8W 9J2

The personal information is collected under section 26 (a) and (c) of the *Freedom of Information and Protection of Privacy Act* for the purpose of administering the *Motor Vehicle Act*. If you have any questions about the collection, use and disclosure of the information collected, contact RoadSafetyBC at PO Box 9254Stn Prov Govt, Victoria BC, V8W 9J2, phone 250-387-7747.

Ministry of Public Safety and Solicitor General	RoadSafetyBC www.gov.bc.ca/roadsafetybc	PO Box 9254 Stn Prov Gov Victoria BC V8W 9J2	Telephone: (250) 387-7747
MV0707 (10/17)			