Appendix 4



Request for exemption from carrying wheelchairs

Medical Report from applicants own GP requirements:

In order for the Licensing committee to consider your request for a medical exemption from carrying wheelchairs, please ensure that the following questions are answered in the GP letter and to expand further if any condition is likely to be permanent or temporary:

- 1. In your professional opinion does the applicant have any medical conditions that could affect their driving?
- 2. In your professional opinion, is there any medical reason why the applicant would not be able to assist a passenger to get into or out of a vehicle?
- 3. In your professional opinion, is there any medical reason why the applicant would not be able to load a passenger's luggage into or out of a vehicle?
- 4. In your professional opinion, is there any medical reason why the applicant would not be able to load a passenger's wheelchair into or out of a vehicle?

Any further comments:	
comments:	

Signature:
Print Name
Address of GP Practice or stamp
Date