



LUCKY TRANSPORT (Pvt.) Ltd.

Office # 609, 6th Floor Faisal Marine, Block # 6. 10A Sharah-e-Faisal Karachi.

www.luckytransports.com

Tel: 0213-4390100

DRIVER REGISTRATION FORM

SECTION 1: APPLICANT DETAILS

Full Name as Per CNIC	
CNIC Number	
Date of Birth	
Temporary Address	
Permanent Address	
Mobile Number	
Home Number	
Emergency Contact Number	

SECTION 2: VEHICLE DESCRIPTION & SERVICE SELECTION

Vehicle Type	
Registration Number	
Chassis Number	
Date of Manufacture	
Date of Registration	
Model	
Licence Number	
Licence Type	
Service Type	

SECTION 3: REFERENCE DETAILS

Reference Name 1	
Reference CNIC	
Reference Cell Number	
Reference Name 2	
Reference CNIC	
Reference Cell Number	

SECTION 4: UPLOAD DOCUMENTS IN APP

1-	Headshot Photo
2-	CNIC both Sides
3-	Licence
4-	Vehicel Image
5-	Registration Letter

SECTION 5: DECLARATION

I declare that I have read and completed this application myself. The information given here is true to the best of my knowledge and I have not wilfully suppressed any material fact. I understand that any offer is conditional until the verification of any or all of the information. Any false declaration, misleading or false information or the omission of a material fact and may render my application invalid or termination of existing access.

I further declare that I shall be liable if I have knowingly or recklessly made a false statement or omitted any relevant information, resulting in damages directly or indirectly sustained by Lucky Transport.

I understand that Lucky Transport may share this information with other agencies (never individuals) if I agree that I will be responsible for any goods and services tax that may be chargeable on the commission that is levied by Lucky Transport and this amount shall be deducted from the fares I receive. I agree to pay the commission from fares received via pre-payment at a rate that be decided by Lucky Transport from time to time

I agree to comply with such guidelines as may be issued by the Company from time to time.

I undertake to inform Lucky Transport within 14 days if I am charged with, or convicted of, any new criminal offence; receive a police caution; am disqualified from driving; made the subject of a mental health or sexual offences order; or if my medical status changes in any way that would affect my driving.

I confirm I have read and understood the declarations above, including the permissions contained therein.

Name & Signature		Date	
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