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HRNSW LICENCE UPGRADE APPLICATION B GRADE DRIVER TO A GRADE DRIVER

Please note that this Licence Upgrade Application is to be completed in full and returned to Harness Racing NSW for processing. Forms received that are either incomplete or incorrectly filled in will be returned to the applicant unprocessed.

LICENCE UPGRADE APPLICATION CHECKLIST											
Mark boxes with either a \checkmark or X as appropriate:											
	I currently hold a B Grade Driver's licence, and have held this licence level for a period of not less than eighteen (18) consecutive months									utive months	
	I have attained the age of seventeen (17) years;										
	I have completed two hundred (200) drives;										
	I have driven fifteen (15) winners;										
	I have not incurred three (3) or more suspensions for driving related matters in the past two hundred (200) drives;										
	I have not incurred twelve (12) or more infringements for driving related matters in the past two hundred (200) drives;										
I have undertaken a HRNSW Medical Assessment during the last six (6) calendar months (see note below);											
I have undertaken a Cognitive Test and have enrolled in the HRNSW Education & Welfare Program (if required to do so).											
If you have not undertaken a HRNSW Medical Assessment during the last six months you may be required to do so as part of the overall licence upgrade process.											
Note that all Licence Upgrade Applications submitted are subject to review by the Harness Racing NSW Licencing Committee which may necessitate further information and/or undertakings on your part prior to a Licence Upgrade Application being considered or approved.											
HRNSW Lice	mation regarding the documen ncing Policy (available at www.h to receipt and processing of this	rnsw.co	om.au or by contact	ing Harn							
	between 2 – 6 weeks for the pr received during the annual rene										
APPLICANT INFORMATION											
Title	Surname		Given Names								
Residential Address											Post Code
Postal Address (if different from residential)											Post Code
Home Phone			Work Phone			Fax Number					
Mobile Number			Date of Birth		Place of Birth						
email address											
Signature of Applicant					Date Licence Nu				e Nur	nber	