

Medical conditions continued

I certify to the best of my knowledge and belief, the information supplied by me on this form is accurate, and understand that the personal information collected on this form will be used by the North Norfolk District Council to determine my continued suitability to hold a combined driver's licence.

I understand also that the information provided on this form is subject to the provisions of the General Data Protection Regulations (Regulation (EC) 2016/679 which is in force in the UK from 25 May 2018) (GDPR).

Applicant's signature:

Date: