

Driver's Licence Questionnaire

Answer Yes or No to the following questions.

Caution: it is a punishable offence to knowingly make a false answer to any question.

- 1** Are you now prohibited by court from driving or is your driver's licence or right to obtain a driver's licence currently suspended or cancelled? Yes No
- 2** When driving do you require corrective lenses (glasses or contacts)? Yes No
- 3** Have you ever had any of the following conditions which have **not previously been reported** to Medical Records:
- a) Seizures or blackouts? Yes No
 - b) Lung or heart trouble, eye diseases, stroke, diabetes treated with injectable insulin, mental disorder, dementia, or permanent limitation of movement? Yes No
 - c) Any other medical condition or physical disability that may affect your safe operation of a motor vehicle? Yes No

If **Yes**, to a, b, or c the date and details of the condition(s) must be provided below.

- 4** Do you hold a valid driver's licence from another province, state, or country?
If **Yes**, state where below and include the driver's licence number, effective and expiry dates and driver's licence class. Yes No
- 5** Have you ever held a Manitoba driver's licence or a learner's licence?
If **Yes**, state in what year below. Yes No
- 6** Have you had any name changes within the last five years?
If **Yes**, provide former name(s) below if you have not already reported the change to Manitoba Public Insurance. Yes No

Additional Information