





## Explanation of the form

**Applicant's signature**  
ONLY in black color without exceeding or touching the edges of the square

**Last name / First name:**

**Place and date of birth:**

**Address:**

**Telephone number:**

**E-mail address:**

I would like to collect my new driving licence at:

**Explanations**

Recent 45/35 mm **photo** on flexible paper, the head taken from the front being at least 20 mm high and meeting the requirements of article 78 of the Highway Code.

**Medical certificate** (less than 3 months old), compiled in the required format by an authorised general practitioner and/or a specialist in internal medicine in Luxembourg.

<sup>1</sup>A medical certificate must also be provided in the case:

- of an expired heavy category to be renewed
- the renewal of the driving license after 60 years of age

Recent extract of the **criminal record** of the last place of normal residence abroad, before the one in the Grand Duchy and covering the last 5 years.

I have taken note of the provisions under (6) of Article 2 of the amended law of 14 February 1955 on the regulation of traffic on all public roads, according to which my driving licence may be withdrawn by decision of the Minister, having Transport in his attributions, when it is established that I have made inaccurate declarations or that I have used fraudulent means to obtain a driving licence. The data contained herein, as well as the attachments, will be recorded and processed electronically in accordance with the amended law of 2 August 2002 on the protection of individuals with regard to the processing of personal data. I declare, by my signature, that I have read and approved the information contained in this application and certify the accuracy of the data provided.

**Explanations**

**30 € tax stamp**, to be obtained from the Administration de l'Enregistrement (<http://www.aed.public.lu/timbres/index.html>) by bank transfer (enclose the debit note) or directly from the SNCA with a supplement of 3 € for administration costs. Be sure to mention the name and surname of the person concerned and the explicit reason for the licence.

Clearly readable double-sided **photocopy** of the national or foreign **driving licence**.

Clearly readable **photocopy** of a **valid identity document** of the applicant (e. g. ID card, passport, travel document).

**Luxembourg criminal record** (Bulletin N°4 dated less than 3 months ago).

By my signature, I authorize the SNCA to request, as part of this request, an extract from my criminal record from the Parquet général.

**Type of request**  
please tick the appropriate box

	Prise en compte	Mutualisation	Autre pays de l'EEE	Autre pays non EEE	Autre pays non EEE	Autre pays non EEE	Autre pays non EEE	Autre pays non EEE	Autre pays non EEE
<input type="checkbox"/> Registering a foreign driving licence (EEA)									
<input type="checkbox"/> Exchanging a foreign driving licence (EEA)	x	x <sup>1</sup>	x	x	x	x	x	x	x
<input type="checkbox"/> Converting a foreign driving licence (NON EEA)	x	x	x	x	x	x	x	x	x
<input type="checkbox"/> Exchanging a foreign driving licence which is already registered	x	x <sup>1</sup>	x	x	x	x	x	x	x