

In this document, a reference to a medical condition means a mental or physical incapacity.

This form is to be used by you, as a driver on Queensland roads, to notify the Department of Transport and Main Roads (TMR), as required by law, that you have a medical condition that is likely to adversely affect your ability to drive safely.

This medical condition may be one of the following-

- any permanent or long term medical condition
- any permanent or long term increase in, or other aggravation of a medical condition about which you have previously notified TMR.

You are not required to notify TMR if your medical condition is of a temporary nature.

If you are required to give TMR a completed *Medical Certificate for Motor Vehicle Driver* (form 3712) with this form and if it is not provided, your driver licence will be immediately suspended.

	uspended.
	ease print clearly in dark pen (not pencil or erasable ink).  Your driver licence details
1.	Driver licence number Expiry date
	State/Territory/Country of issue
	Clate, remiory, country or issue
2.	Your personal details
	Family name
	Given name/s
	Date of birth (dd/mm/yyyy)
	/ / Male Female
	Residential address
	Postcode
	Postal address (if same as residential, write 'as above')
	Postcode
	Telephone/mobile number
	Email address
	Email address
	Would you like to get e-notices and e-reminders?  No Yes Yes
3.	Your medical condition
	Do you need to wear glasses/contact lenses for driving?
	No Yes Yes
	If you answered Yes to wearing glasses/contact lenses for driving, do you agree to your Queensland driver licence being amended to add a S condition?
	Yes A replacement driver licence will be sent to your nominated mailing address, you should allow up t two weeks for delivery.
	No You will receive a written notice proposing the

amendment of your driver licence.

continued next column...

## **Medical Condition Notification**

Transport Operations (Road Use Management) Act 1995 Transport Operations (Marine Safety) Act 1994

	other vision or eye disorders?		
Certificat  Do you have a per	required to give TMR a completed <i>Medical</i> refor <i>Motor Vehicle Driver</i> (form F3712).  rmanent or long term medical condition rersely affect your ability to drive a motor		
No _			
	required to give TMR a completed <i>Medical</i> e for <i>Motor Vehicle Driver</i> (form F3712).		
	permanent or long term increase in, or nedical condition about which you have TMR?		
	required to give TMR a completed <i>Medical</i> refor <i>Motor Vehicle Driver</i> (form F3712).		
Do you agree to th	ver licence amendment ne amendment of your Queensland driver pose of adding/removing a class and/or or driver licence?		
will need Amendm	river licence requires amendment you to complete a separate <i>Driver Licence</i> nent (form F4358), which may delay the f your driver licence.		
. Voluntary surre	nder		
Are you voluntarily licence because you condition?	v surrendering your Queensland driver ou can no longer drive due to a medical u enclosed your driver licence with this		
Yes			
No	What is the reason for not enclosing your driver licence?		
	I have already returned my driver licence to: Location		
	I have not returned my driver licence because it has been:		
	Destroyed Lost Stolen		
	Other pive details below		
If you are a Queensland licence holder, you may be eligible for a refund of the unexpired portion of your driver licence. Please indicate below if you would like TMR to consider your request for a refund?  No			
Yes <b>▶</b> TMR ma	y contact you for additional information.		

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6. Do you have a Queensland marine licence?	Office use only
-	Date notified
No	Date notined
Yes Do you want to surrender your marine licence?	
Yes	Notification method-
No A marine licence indicator card will be	
sent to you.	Email Mail Fax In person
·	Medical certificate presented?
7. Your declaration	Yes No
I declare that the information I have provided in this form is	
true and I understand–  • that action may be taken to amend, suspend, or cancel my	Other medical report attached?
driver licence if it is proven the driver licence was obtained	Yes No
on the basis of information I knew was false or misleading	If the refund is to be issued by EFTPOS/Credit Card: I confirm
and that I may be prosecuted as a result.	that all requirements have been met to issue an electronic
Signed	refund.
	Verifying operator's username
	, , ,
Date	
	Verifying operator's signature
, ,	
Privacy statement TMR provides this form under the Transport Operations (Road Use Management)	Authorised person's name (please print)
Act and the Transport Operations (Marine Safety) Act for you to notify TMR about	
your medical fitness to continue to hold a driver licence and/or marine licence.  The information given in this form may be used by TMR to decide whether you	
are medically fit to continue to hold a driver licence and/or marine licence.	Signed
This information is accessible by authorised departmental persons and may be disclosed to the Queensland Police Service and interstate driver licensing	
authorities. TMR will not disclose your personal details to any other third parties	
without your consent unless authorised or required by law.	Date
Note: You may give notification by–	Office stown
	Office stamp
Email: mcr@tmr.qld.gov.au	
Mail: Department of Transport and Main Roads	
Locked Bag 2000 Red Hill	
ROCKHAMPTON QLD 4701	
<b>Facsimile</b> : 07 4931 1624	
In person: At any departmental customer service centre or	Notes
driver licence issuing centre.	NOIGS