TOURISM DRIVERS PERMIT - BUS

VANUATU TOURISM OPERATORS MINIMUM STANDARDS

Your Name:	
Name of Business:	WENT OF
Business Licence Number:	A CO
Licence Issuing Authority:	The state of the s
Sub Association:	Vanualu
Date of Assessment:	OTED TOURISM BU
ASK YOUR ASSOCIATION PRESIDENT FOR HELP GIVE THE COMPLETED FORM TO YOUR ASSOCIATION PRESIDENT	Vanuatu
BEFORE DOING SO TICK THE BOXES BELOW FOR ALL THE STANDARDS YOU MEET	
TRANSPORT OPERATIONS	
Medical Certificate: Must provide a medical certificate undertaken by a private doctor or hosp Medical check must include: eyesight, hearing and overall fitness.	oital.
Driver's Licence: Must provide a current Vanuatu driver's licence.	
Association Membership: Must provide a Land Transport Association membership certificate (if certificate not available, a confirmation letter from the President of the association).	
Police Report: Must provide a police report.	
Name & Signature of Representative:	
(By signing, I agree that the DoT may conduct spa	ot checks.)

Printed: 2/01/2018

BUSINESS CONTACT DETAILS CHECK FORM			
Contact Person:			
Address:			
Phone No. 1:			
Phone No. 2:			
Email Address:			
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HELP US KEEP IN TOUCH

Please complete this form so that the Department can ensure your contact details are correct in our Database.