



PROVINCE OF KWAZULU – NATAL – ISIFUNDAZWE SAKWAZULU - NATALI

DEPARTMENT OF TRANSPORT

UMNYANGO WEZOKUTHUTHA

Choice Numbers

**APPLICATION FOR THE TRANSFER OF A PERSONALISED LICENCE NUMBER**

I/We,  hereby make application on

for the transfer of Personalised Licence Number

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**Current Owner**

**New Owner**

Name/Company Name:  Name/Company Name:

Postal Address:

Identification Number:  Identification Number:

**Contact Details**

**Contact Details**

Telephone Number:    
 Cell Number:    
 Facsimile Number:

e-mail address:  e-mail address:

(when applicable) **Dealers Details**

Name

Telephone Number    
 Facsimile Number

All Choice Number requests can be forwarded Monday to Friday 7:30am to 4:00pm.

**MOTOR TRANSPORT SERVICES DIRECTORATE**