

七十歲或以上人士申請正式或學習駕駛執照

須進行之體格檢驗

- 注意 : 此體格檢驗證書必須於申請人提出申請前四個月內簽發。
- 申請人姓名 :
- 身份證號碼 :

體格檢驗報告

		是	否	附註
視力	: 任何眼疾或視力失調，以致在白晝光線下，不能讀出在距離二十三米處之車牌號碼	<input type="checkbox"/>	<input type="checkbox"/>	
	駕駛時須佩戴眼鏡或其他矯正視力鏡片	<input type="checkbox"/>	<input type="checkbox"/>	
	一目失明或僅有單眼視力	<input type="checkbox"/>	<input type="checkbox"/>	
精神狀態	: 癲癇或其他痙攣病症	<input type="checkbox"/>	<input type="checkbox"/>	
	任何精神病，包括可能影響駕駛能力之中樞神經系統老年性變質或血管變質	<input type="checkbox"/>	<input type="checkbox"/>	
	任何毒癮徵象	<input type="checkbox"/>	<input type="checkbox"/>	
	可能影響精神狀態之任何過往及現在藥療病歷	<input type="checkbox"/>	<input type="checkbox"/>	
	不受控制之糖尿病	<input type="checkbox"/>	<input type="checkbox"/>	
	任何酒精中毒病歷	<input type="checkbox"/>	<input type="checkbox"/>	
骨骼及肌肉系統	: 骨骼、關節及肌肉之先天性變形	<input type="checkbox"/>	<input type="checkbox"/>	
	足以導致殘廢之任何類型關節炎	<input type="checkbox"/>	<input type="checkbox"/>	
	近期或過往曾患癱瘓	<input type="checkbox"/>	<input type="checkbox"/>	
	近期曾嚴重受傷	<input type="checkbox"/>	<input type="checkbox"/>	
平衡與協調	: 足以導致突然發生失去活動能力之眩暈或昏倒之疾病或機能失調，例如耳病性眩暈，不受控制之高血壓、小腦疾病、嚴重貧血、心傳導阻滯或哮喘等	<input type="checkbox"/>	<input type="checkbox"/>	
	造成肌肉共濟失調或震顫之任何失調或疾病	<input type="checkbox"/>	<input type="checkbox"/>	
聽覺	: 足以導致失聰或平衡紊亂之耳部疾患	<input type="checkbox"/>	<input type="checkbox"/>	
其他	: 任何慢性阻塞性氣道病	<input type="checkbox"/>	<input type="checkbox"/>	
	任何類型之高血壓	<input type="checkbox"/>	<input type="checkbox"/>	
	任何變質性或局部缺血性心臟病之徵象	<input type="checkbox"/>	<input type="checkbox"/>	
	任何近期或過往進行之大手術	<input type="checkbox"/>	<input type="checkbox"/>	
	可能影響駕駛機動車輛能力之任何其他疾病	<input type="checkbox"/>	<input type="checkbox"/>	

有關申請人在體格方面是否適宜駕駛車輛之建議(注釋一)：

(請在下列適當方格內加上(✓)號)

- 一、 上述申請人在體格方面適宜駕駛車輛
- 二、 上述申請人在體格方面適宜駕駛車輛，惟須遵守下開條件：
- (甲) 駕駛時須佩戴矯正視力之鏡片
- (乙) 駕駛時須戴上助聽器
- 三、 上述申請人在體格方面不適宜駕駛車輛

其他附註 : \_\_\_\_\_

檢驗日期 : \_\_\_\_\_

註冊醫生姓名 : \_\_\_\_\_  
(注釋二)

地址 : \_\_\_\_\_

電話號碼 : \_\_\_\_\_

.....  
註冊醫生簽署

注釋一：

根據道路交通(駕駛執照)規例之規定，倘運輸署署長認為申請人患有下列所述之任何疾病或傷殘情況，得拒絕簽發或換領駕駛執照：

- 一、 癲癇症。
- 二、 高血壓或其他因由，以致有可能突然暈眩或昏倒以致失去能力。
- 三、 精神紊亂，以致執照申請人或持有人(視屬何情況而定)有可能根據《精神健康條例》(第 136 章)被羈留或以住院病人身分在該條例所指的精神病院接受治療。
- 四、 任何導致肌肉不受控制的狀況。
- 五、 未受控制的糖尿病。
- 六、 不能在白天充足光線下讀出與他相距 23 米的登記號碼(有需要者在配戴眼鏡或其他矯正視力鏡片作為協助，仍不能讀出)。
- 七、 任何其他疾病或傷殘，而該疾病或傷殘很可能令申請人或持有人沒有能力在不危及公眾安全的情況下，有效地駕駛或控制該執照所指的汽車或經適當改裝的汽車；但失聰本身並不當作為上述的傷殘。

注釋二：註冊醫生是指根據香港法例第 161 章《醫生註冊條例》正式註冊為香港醫務委員會註冊醫師或被當作已根據該條例註冊為醫生的人。海外執業的醫生亦須符合香港法例第 161 章《醫生註冊條例》之註冊要求。

在接獲填妥的體格檢驗證書後，運輸署或會向上述署名簽發的註冊醫生查證會否向申請人發出此證書。

**Medical Examination for an Applicant of 70 years of age or above  
for a Full or Learner's Driving Licence**

*Important:* This medical examination report must be issued on a date within 4 months before application.

*Name of Applicant :*

*I.D. No. :*

**Medical Examination Report**

	Yes	No	Remarks
<i>Eyes-sight:</i>			
Any eye disease or disorder that will lead to inability to read at a distance of 23 metres in good daylight a registration mark	<input type="checkbox"/>	<input type="checkbox"/>	
Need to wear spectacles or other corrective lenses while driving	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of one eye or mono-ocular vision	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Mental State:</i>			
Epilepsy or other convulsive disorder	<input type="checkbox"/>	<input type="checkbox"/>	
Any mental disorder including senile or vascular degeneration of the central nervous system which may affect his/her fitness to drive	<input type="checkbox"/>	<input type="checkbox"/>	
Any sign of drug addiction	<input type="checkbox"/>	<input type="checkbox"/>	
Any past and present history of medication that might affect the mental state	<input type="checkbox"/>	<input type="checkbox"/>	
Uncontrolled diabetes mellitus	<input type="checkbox"/>	<input type="checkbox"/>	
Any history of alcoholism	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Skeletal and Muscular System:</i>			
Congenital deformity of bones and joints and muscles	<input type="checkbox"/>	<input type="checkbox"/>	
Any form of crippling arthritis	<input type="checkbox"/>	<input type="checkbox"/>	
Recent or past paralysis	<input type="checkbox"/>	<input type="checkbox"/>	
Recent severe injury	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Balance and Coordination:</i>			
Disease or disorders leading to sudden attacks of disabling giddiness or fainting such as Meniere's Disease, uncontrolled hypertension, cerebellar disorder, severe anaemia, heart-block and asthma	<input type="checkbox"/>	<input type="checkbox"/>	
Any disorder or diseases causing muscular incoordination or tremor	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Hearing:</i>			
Disorders or diseases of the ear leading to deafness or disturbance of balance	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Others:</i>			
Any chronic obstructive airway disease	<input type="checkbox"/>	<input type="checkbox"/>	
Any hypertension	<input type="checkbox"/>	<input type="checkbox"/>	
Any sign of degenerative or ischaemic heart disease	<input type="checkbox"/>	<input type="checkbox"/>	
Any recent or past major surgery	<input type="checkbox"/>	<input type="checkbox"/>	
Any other disease that may affect the efficiency of driving a motor vehicle	<input type="checkbox"/>	<input type="checkbox"/>	

Recommendation for Medical Fitness of applicant to drive (Note 1):  
(Please tick (✓) in the appropriate box(es).)

- 1. The above-named person is medically fit to drive.
- 2. The above-named person is medically fit to drive on condition that
  - ( a ) he/she wears corrective lenses while driving
  - ( b ) he/she wears hearing aids while driving
- 3. The above-named person is medically not fit to drive.

Other Remarks : \_\_\_\_\_

Date of Examination : \_\_\_\_\_

Name of Registered Medical Practitioner : \_\_\_\_\_ Tel. No. \_\_\_\_\_  
(Note 2) (IN BLOCK LETTERS)

Address : \_\_\_\_\_

.....  
*Signature of Registered Medical Practitioner*

Note 1:

According to the Road Traffic(Driving Licences) Regulations, if it appears to the Commissioner for Transport that the applicant is suffering from any disease or physical disability referred to below, the Commissioner shall refuse to issue or renew the driving licence:

- 1. Epilepsy.
- 2. Liability to sudden attacks of disabling giddiness or fainting due to hypertension or any other cause.
- 3. Mental disorder for which the applicant for the licence, or, as the case may be, the holder of the licence is liable to be detained under the Mental Health Ordinance (Cap. 136) or is receiving treatment as an in-patient in a mental hospital within the meaning of that Ordinance.
- 4. Any condition causing muscular incoordination.
- 5. Uncontrolled diabetes mellitus.
- 6. Inability to read at a distance of 23 metres in good daylight (with the aid of spectacles or other corrective lenses, if worn) a registration mark.
- 7. Any other disease or disability which is likely to render him incapable of effectively driving and controlling a motor vehicle or suitably adapted motor vehicle to which such licence refers without endangering public safety, provided that deafness shall not of itself be deemed to be any such disability.

Note 2: Reistered medical practitioner means a person duly registered medical practitioner of the Medical Council of Hong Kong, or deemed to be registered as a medical practitioner under Medical Registration Ordinance (Cap. 161), Laws of Hong Kong. Overseas medical practitioner shall also comply with the registration requirement under Medical Registration Ordinance (Cap. 161), Laws of Hong Kong.

Upon receipt of this completed medical examination report, the Transport Department may approach the above signing medical practitioner for confirming the issuance of this report in respect of the Applicant.

## **收集目的**

1. 運輸署會使用透過本表格所獲得的個人資料作下列用途：
  - (a) 辦理有關審批你在本表格中所提出的申請的事務；
  - (b) 依照道路交通（車輛登記及領牌）規例第 4(2)條的規定，保存一份車輛紀錄，讓市民索閱；  
(只適用於與車輛有關的申請)
  - (c) 依照道路交通（駕駛執照）規例第 39 條的規定，保存一份詳列駕駛執照上各細項的紀錄；  
(只適用於與駕駛執照有關的申請)
  - (d) 辦理有關交通及運輸的事務；及
  - (e) 方便運輸署與你聯絡。
2. 你必須提供本表格所要求的個人資料。假如你未能提供所需資料，你的申請可能不獲接納。

## **獲轉交資料的部門／人士**

3. 你透過本表格所提供的個人資料會向下列人士／部門公開：
  - (a) 其他政府部門、決策局及有關機構，以作上述第 1 段所列的用途；
  - (b) 任何人士，以作上述第 1 段 (b) 項所列的用途；及
  - (c) 隧道公司、青馬管制區營運者及清沙管制區營運者，以便該等機構執行與交通及運輸有關的法定職責。

## **索閱個人資料**

4. 根據個人資料（私隱）條例第 18 及 22 條及附表 1 第 6 條，你有權索閱及修正你的個人資料。你的索閱權包括獲取本表格所提供的個人資料副本一份。

## **查詢**

5. 有關透過本表格收集的個人資料的查詢，包括索閱及修正資料，應寄往：  
香港  
金鐘道 95 號  
統一中心 3 樓  
牌照事務組  
行政主任／FRT 收啓

## **Purposes of Collection**

1. The personal data provided by means of this form will be used by Transport Department for the following purposes :
  - (a) activities relating to the processing of your application in this form;
  - (b) maintenance of a register of vehicles for public access under regulation 4(2) of the Road Traffic (Registration and Licensing of Vehicles) Regulations;  
(applicable to vehicle-related applications only)
  - (c) maintenance of a record of particulars of driving licences under regulation 39 of the Road Traffic (Driving Licences) Regulations;  
(applicable to driving licence - related applications only)
  - (d) activities relating to traffic and transport matters; and
  - (e) facilitating communication between Transport Department and yourself.
2. It is obligatory for you to supply the personal data as required by this form. If you fail to supply the required data, your application may be refused.

## **Classes of Transferees**

3. The personal data you provided by means of this form may be disclosed to :
  - (a) other Government departments, bureaux and relevant organizations for the purposes mentioned in paragraph 1 above;
  - (b) any person for the purpose mentioned in paragraph 1(b) above; and
  - (c) tunnel companies , Tsing Ma Control Area operator and Tsing Sha Control Area operator for execution of their statutory duties in traffic and transport matters.

## **Access to Personal Data**

4. You have a right of access and correction with respect to personal data as provided for in sections 18 and 22 and principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data provided by this form.

## **Enquiries**

5. Enquiries concerning the personal data collected by means of this form, including the making of access and corrections, should be addressed to:  
Executive Officer/FRT  
Licensing Section,  
3/F, United Centre  
95 Queensway  
Hong Kong