



# Application for the exchange of a foreign driving licence

Please transfer the following driving licence categories:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Professional:  yes  no

## 1. Personal details (please use upper and lower case)

Last name (also name at birth) \_\_\_\_\_

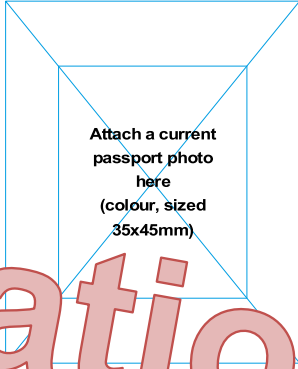
First name(s) \_\_\_\_\_

Street, No. \_\_\_\_\_

Zip / Postcode \_\_\_\_\_ Place of residence \_\_\_\_\_

Home country \_\_\_\_\_

Date of birth (DD/MM/YYYY) \_\_\_\_\_ female  male  Phone number \_\_\_\_\_



Applicant's signature (please keep within the field)

Former place of residence \_\_\_\_\_ until \_\_\_\_\_

## Authority confirming the applicant's identity and personal data

\_\_\_\_\_

Date of identification \_\_\_\_\_ Stamp and signature \_\_\_\_\_

## 2. Illnesses, disabilities, substance use

**2.1 Do you have any of the following illnesses or are you in medical treatment for them**

- Diabetes or other metabolic diseases?  ja  nein
- Cardiovascular disease?  ja  nein
- Eye disease?  ja  nein
- Disease of the respiratory organs?  ja  nein
- Disease of the abdominal organs?  ja  nein
- Disease of the nervous system?  ja  nein
- Kidney disease?  ja  nein
- Increased daytime sleepiness?  ja  nein
- Chronic pain?  ja  nein
- Accident injuries that have not healed without consequences?  ja  nein
- Diseases with brain disorders?  ja  nein

**2.2 Have you ever had or do you currently have**

- Epilepsy or epileptic seizures?  ja  nein
- Dizzy or weak spells or a condition that causes drowsiness?  ja  nein
- Problems with alcohol, narcotics or medicines?  ja  nein
- A mental illness such as schizophrenia, psychosis, manic or severe depression?  ja  nein
- Disabilities or other illnesses that could prevent you from driving a vehicle safely?  ja  nein

**2.3 Have you ever been or are you currently**

- in withdrawal therapy or outpatient treatment for problems with alcohol, narcotics or medicines?  ja  nein
- in inpatient or outpatient treatment for a mental illness such as schizophrenia, psychosis, a manic or severe depressive disorder, etc.?  ja  nein

**2.4 Remarks:**

\_\_\_\_\_

\_\_\_\_\_

If you answer "yes" to any of the medical questions in section 2, you must attach a medical report to this application.

## 3. Are you a minor or are you under full legal guardian or advisorship?

Name, address and signature of the legal representative  ja  nein

\_\_\_\_\_

\_\_\_\_\_

Application control	Admas	Doctor	Conditions
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## 4. Eye test, to be completed by a Swiss optician/medical practitioner (valid 24 months)

**4.1 Visual acuity:** Fernvisus R: \_\_\_\_\_ L: \_\_\_\_\_ R: \_\_\_\_\_ L: \_\_\_\_\_  
unkorrigiert \_\_\_\_\_ korrigiert \_\_\_\_\_

**4.2 Horizontal field of vision:**  ≥ 120  < 120 (1. med. Gruppe)  
 ≥ 140  < 140 (2. med. Gruppe)

**Impairments of the field of vision:**  nein  ja  rechts  links  
 oben  unten

**4.3 Ocular Mobility**  nach rechts oben, rechts, rechts unten links oben, links, links unten geprüft

**4.4 Double vision**  nein  ja, Richtung \_\_\_\_\_

**4.5 Assessment**  1. med. Gruppe  2. med. Gruppe  
 ohne Sehhilfe  ohne Sehhilfe  
 mit Sehhilfe  nur mit Sehhilfe  
 nur mit ärztlicher Zustimmung  nur mit augenärztlicher Zustimmung

Datum \_\_\_\_\_ Stempel und Unterschrift \_\_\_\_\_

## 5. Previous licences

**5.1 Have you ever been refused your learner's licence or driving licence, or had it withdrawn, or have you ever been banned from driving?**  ja  nein

I waive the category/categories: \_\_\_\_\_

Signature \_\_\_\_\_

If you deliberately provide false information, we may refuse to issue your licence and you will be fined.  
All other information about categories and about exchanging your foreign driving licence can be found on [www.stva.zh.ch](http://www.stva.zh.ch)

Translation only

Completed by a Swiss optician

