



# Retained Recruitment Driving Questionnaire

**Confidential**

To ensure compliance with the EC Drivers Hours & Tachograph Rules for Goods Vehicles (Regulation 561/2006) it is necessary that you complete the information below and return this Driving Questionnaire with your Retained Recruitment Enquiry Form. You will find further information about the Rules on our website.

**Name:**..... **National Insurance No:**.....

Please tick all boxes that apply and provide supporting detail.

## 1. Primary/Secondary Employment details in relation to Driving:

a. my Primary/Secondary employment is a full-time driver of a goods or passenger vehicle.

Details:.....  
.....

b. my Primary/Secondary employment involves some driving for my employer of a goods or passenger vehicle.

Details:.....  
.....

c. I am a self-employed driver.

Details: .....  
.....

d. I am a 'mobile worker' as defined by the legislation, i.e., a member of a driving crew (see AF&RS website for more information).

Details: .....  
.....

e. I do not carry out any driving activities of goods vehicles as part of my Primary/Secondary employment.

Details:.....  
.....

**2. If applicable, the type of vehicle I drive is:**

a. In excess of 3.5 tonnes gross laden weight

b. Less than 3.5 tonnes gross laden weight

c. Carries more than 8 passengers/more than 9 seats

d. Carries less than 8 passengers

It is important that you notify us immediately should the information you provide on this form change following submission, as this might affect your application.

Signature: ..... Date:.....

Print Name: .....

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