Government of South Australia
Department of Planning, Transport and Infrastructure

EYESIGHT CERTIFICATE

MR204
07/19

TO THE MEDICAL PRACTITIONER, OPTOMETRIST OR OPHTHALMOLOGIST

An applicant for the issue of a driver's licence, or a particular class of licence, with a vision or eye disorder, is required to provide the Registrar of Motor Vehicles with evidence that they meet the required eyesight standards. Current licence holders may also be required to provide evidence of their eyesight standards to retain their driver's licence, or particular class of licence.

To determine if the person meets the required standards, the person should be assessed using the national guidelines "Assessing Fitness to Drive for Commercial and Private Vehicle Drivers."

After examining the person, the Eyesight Certificate below should be completed. The person is then required to submit the completed certificate to a Service SA Centre.

1. ABOUT THE APPLICANT – to be completed by applicant or licence holder. *(Please write in BLOCK LETTERS)*

SURNAME | GIVEN NAMES

ADDRESS | POSTCODE

DATE OF BIRTH | LICENCE NUMBER (if known) | LICENCE CLASS (if known)

Does driving form part of your occupation? YES ☐ NO ☐

If you answered 'Yes', approximately how many hours per day do you drive as part of your occupation?
Note: This should include all associated tasks (e.g. vehicle loading/unloading)

HOURS

EYESIGHT CERTIFICATE (Please answer questions below and provide details where appropriate.)

Are any of the following vision or eye conditions present? If YES, please tick:

☐ Diplopia ☐ Monocular Vision ☐ Visual Field Defect ☐ Retinitis Pigmentosa

Note: If any of the above are ticked, the Eyesight Certificate must be completed by an Optometrist or Ophthalmologist.

Are any of the following vision or eye conditions present? If YES, Please tick:

☐ Cataracts ☐ Glaucoma ☐ Macular Degeneration ☐ Poor Night Vision

☐ Other condition which may impair their ability to drive (please specify) _____

Private Vehicle Drivers (Classes C, LR, R or R-Date)			
The patient's visual acuity with corrective lenses in the better eye or with both eyes together must be at least 6/12. **If the patient doesn't meet the standards, the Eyesight Certificate must be completed by an Optometrist or Ophthalmologist.**			
Visual Acuity Together	**Right**	**Left**	
Uncorrected	6/__	6/__	6/__
Corrected (glasses/contacts)	6/__	6/__	6/__
Does your patient meet the eyesight standards in the Assessing Fitness to Drive 2016 guidelines?		☐ No	☐ Yes

Commercial Vehicle Drivers (Classes MR, HR, HC, MC or holders of Class C who drive public passenger vehicles or vehicles carrying dangerous goods)			
The patient's visual acuity with corrective lenses in the better eye must be at least 6/9 and the worse eye at least 6/18. **If the patient doesn't meet the standards, the Eyesight Certificate must be completed by an Optometrist or Ophthalmologist.**			
Visual Acuity Together	**Right**	**Left**	
Uncorrected	6/__	6/__	6/__
Corrected (glasses/contacts)	6/__	6/__	6/__
Does your patient meet the eyesight standards in the Assessing Fitness to Drive 2016 guidelines?		☐ No	☐ Yes

Are glasses or contact lenses required for driving? ☐ No ☐ Yes

Should a condition be placed on the licence? *(e.g. daylight hours only)* ☐ No ☐ Yes

If Yes is ticked, please provide details below:

_____

_____

MEDICAL PRACTITIONER, OPTOMETRIST OR OPHTHALMOLOGIST

Name ..... Contact Number

Address .....

Signature ..... Date .....

THE COST OF THE EXAMINATION IS TO BE BORNE BY THE APPLICANT

Lodge at any Service SA Centre
For service SA locations **www.sa.gov.au/customerservice** or call 13 10 84
Post to: Service SA, Customer Service Section, GPO Box 1533, Adelaide SA 5001 **www.sa.gov.au/driverslicences** **ABN** 92 366 288 135

ISMF Classification when complete – SENSITIVE: MEDICAL – I3 – A3