

PHILIPPINE INTERNATIONAL DRIVING PERMIT (PIDP) APPLICATION FORM



QUEZON CITY OFFICE: 2nd Floor, AAP Tower, 683 Aurora Boulevard, Quezon City 1112 Tel: (63.2) 705.3333
MAKATI OFFICE: Unit 102 G/F Metrostar Building, 1001 Metropolitan Ave. cor. Kakarong St., Makati City Tel: (63.2) 814.0584 Telefax: (63.2) 817.9758
ALABANG OFFICE: Mall Entrance, G/F, Alabang Town Center, Brgy. Ayala Alabang, Muntinlupa City Tel: (63.2) 850.9831 Fax: (63.2) 850.6903
PAMPANGA OFFICE: Level 2, 21110 Robinsons Starmills City of San Fernando, Pampanga Tel: (63.45) 436.1816
CEBU OFFICE: 105 CRM Bldg., Escario cor. Molave Sts., Cebu City Tel. (63.32) 268-2400
DAVAO OFFICE: Room 314, 3rd Floor, SM City Davao Ecoland, Davao City Tel: (63.82) 299.49.61 to 62
LIPA OFFICE: Amethyst Bldg, 2nd Fir JP. Laurel Highway Brgy. Tambo Lipa, Batangas Tel: (63.43) 784.7972 or (63.43) 784-7998

PIDP FORM NO.: M _____

| PERSONAL INFORMATION | | | | | |
|---|--|------------------------|--|--------------|--------------|
| <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. | | Last name | | First Name | Middle name |
| Birth Date (MM/DD/YYYY) | | Birth Place | | Sex (M/F) | Civil Status |
| Age | | Occupation | | Destination | |
| Citizenship | | ACR No. (if foreigner) | | Home Address | |
| Zip Code | | Tel. No. | | Fax No. | |
| Cell Phone No. | | E-mail Address | | | |
| Company Name | | | | | |
| Company Address | | | | | |
| Zip Code | | Tel. No. | | Fax No. | |
| Authorized Representative | | | | Contact No. | |
| Address | | | | | |

| LICENSE DETAILS | | Driver's License Received by |
|--|--------------------------|------------------------------|
| License No. | | Applicant Signature |
| Date Issued (MM/DD/YYYY) | Expiry Date (MM/DD/YYYY) | |
| License Type: <input type="checkbox"/> Non-Professional <input type="checkbox"/> Professional | | Date (MM/DD/YYYY) |
| Card Type: <input type="checkbox"/> Non-Card <input type="checkbox"/> Card | | |
| Restrictions <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 | | |

| OFFICE USE ONLY | | |
|--|--|--|
| AAP Membership No. | O.R. No. | PIDP Released By |
| Type: <input type="checkbox"/> Regular Member <input type="checkbox"/> PIDP | Validity: <input type="checkbox"/> 1 yr. <input type="checkbox"/> 2 yrs. <input type="checkbox"/> 3 yrs. | <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Reinstatement |
| Expiry Date (MM/DD/YYYY) | Issued By | Remarks |
| PIDP No. (License) | Date Paid (MM/DD/YYYY) | Encoded By |
| Validity: <input type="checkbox"/> 1 yr. <input type="checkbox"/> 2 yrs. <input type="checkbox"/> 3 yrs. | Amount Paid | Printed By |
| Insurance No. | | |

| | | | | | |
|-----------------------|--|-----------|------------|--|---|
| AAP Membership Number | NAME: | | Last name | First Name | Middle name |
| Car Details: | Car Make | Car Model | Year Model | Color | Fuel Type |
| | <input type="checkbox"/> Gas <input type="checkbox"/> Diesel | | | <input type="checkbox"/> Plate No. _____ | <input type="checkbox"/> Conduction Sticker No. _____ |
| | Car Make | Car Model | Year Model | Color | Fuel Type |
| | <input type="checkbox"/> Gas <input type="checkbox"/> Diesel | | | <input type="checkbox"/> Plate No. _____ | <input type="checkbox"/> Conduction Sticker No. _____ |

Towing can be availed after 7 days

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| Requirements: <ol style="list-style-type: none"> 1. Membership in AAP or any FIA accredited motoring club or association 2. Original Philippine Driver's License with photocopy 3. Latest 2X2 ID Photo colored with white background (2pcs.) 4. Original ACR / Passport showing the date of last arrival for foreigners, dual citizens and Filipino citizens born in other countries 5. Accomplish form at the back if applicable |
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AUTHORITY

I hereby authorize M_____ to represent me at the Automobile Association Philippines (AAP) for the purpose of obtaining an international driver's permit, to submit all requirements thereof, and to receive in my behalf, the permit when issued.

I also authorize above representative to sign in my behalf, the AAP proxy form, and I designate M_____, or in his absence, the President of AAP, or the presiding officer, in any and all general assemblies or meetings which AAP may call while my membership remains valid. It is understood the said proxy is automatically invalidated by my actual presence in such assemblies or meetings.

Applicant
Signature over printed name

Date _____