

Street Services

MOT Test Booking Form

Please complete this application form providing the following information:

Applicant Name:	
Address:	
Contact Number:	
Type of vehicle:	
Model:	
Registration Number:	
Date Required: (AM/PM)	

The London Borough of Waltham Forest reserves the right to check that applicants meet the necessary requirements.

Please return the completed application form to:

**Waltham Forest Transport Services
Low Hall Manor Business Centre
Argall Avenue
London E10 7AS
Telephone:
Fax:**

I enclose £ _____ cheques or postal orders should be payable to:
The London Borough of Waltham Forest