



Approved Translator Declaration for Conduct of a Translation

ICBC USE ONLY

B.C. DRIVER'S LICENCE NO.	DATE OF BIRTH (ddmmmyyyy)	NAME CODE
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All documents must be translated from original documents or from a Driver Licensing Office approved stamped copy of the original. These documents must be presented when you return to the Driver Licensing Office.

1. What items need translation?

<input type="checkbox"/> Foreign driver's licence to drive in British Columbia as a visitor or student .
<input checked="" type="checkbox"/> Foreign driver's licence to drive as a new resident or apply for a BC driver's licence .
<input type="checkbox"/> Letter of experience (Commercial class licence applicants—attach original letter of driving experience.)
<input type="checkbox"/> Marriage/Change of name document—to be translated from _____ LANGUAGE THAT DOCUMENT WILL BE TRANSLATED FROM
<input type="checkbox"/> ICBC Driver's Knowledge Test or Vision Screening Test—to be translated from English into _____. In the case of a driver's knowledge test, I understand that ICBC may record and transcribe the translation. (Photocopy of original not necessary.)

2. Complete the section below if you translated a foreign licence or letter of experience. Otherwise, go to 3.

I have translated the **original** or the approved stamped copy of the original attached driver's licence letter of experience. I certify that the translation is true and accurate and that the **original** or the approved stamped copy of the **original** driver's licence/letter of experience contains the following information:

Issuing Agency Details

ISSUING AGENCY Ministry of Transportation and Communications	LANGUAGE TRANSLATED FROM Chinese	ISSUING COUNTRY AND/OR STATE/PROVINCE Taiwan
AGENCY PHONE OR CONTACT INFORMATION +886-2-2349-2900	AGENCY ADDRESS No 50, Sec.1 Renai Rd.Zhongzheng District, Taipei 10052 Taiwan	

Foreign driver's licence details

FOREIGN DRIVER'S LICENCE NUMBER 駕照號碼 (與身份證字號相同)	DATE ISSUED 日/月 (英文縮寫) /年 Y	EXPIRY DATE 日/月 (英文縮寫) /年 Y
DRIVER'S FULL NAME (last name, first name) 英文姓名 (姓氏在前, 名字在後)	DATE OF BIRTH 日/月 (英文縮寫) /年 Y	DATE FIRST LICENSED (if shown) 空白不用填寫 Y Y Y Y
CLASS OF LICENCE 駕照上的持照條件	RESTRICTIONS (if any)	TYPES OF VEHICLES PERMITTED AS STATED ON THE FOREIGN DL Passenger Vehicle

Translator comments/observations/other

3. Complete and sign below.

I, 請勿填寫 _____ declare that the information translated by me is precise, accurate and correct.
PRINT FULL NAME CLEARLY

I have not added any information from one document to the other. In the case of a driver's knowledge test, I understand that ICBC may record and transcribe the translation. I declare that I am an Approved ICBC Translator/Interpreter and have completed and signed the Code of Conduct. I understand it is an offence to provide false and misleading information in the process of applying for a British Columbia Driver's Licence.

請勿簽名
SIGNATURE OF TRANSLATOR/INTERPRETER

請勿填寫
DATE (ddmmmyyyy)

Attach copy of the original driver's licence/letter of experience/identification document.

FOR ICBC USE ONLY

I have verified this translator on the ICBC approved list.

Consulate stamp/stamp/seal/identification number or contact number below:

SIGNATURE OF DRIVER LICENSING REPRESENTATIVE OFFICE STAMP AND/OR LOCATION (if no stamp available)
MV2943 (102014)