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| Infrastructure managers and train operators must have monitoring systems in place to ensure that their drivers continue to meet the conditions for holding a licence.  It is a requirement under the Train Driving Licences and Certificates Regulations 2010 for infrastructure managers and train operators employing a licensed driver to supply ORR with all the relevant information from that monitoring. ORR uses that information so that we can consider whether the conditions for holding a licence continue to be met. ORRs [privacy notice](https://www.orr.gov.uk/privacy-notice) notes that we may need to contact a licenced driver’s employer in relation to the periodic requirements for maintaining the validity of their licence, any queries in relation their licence and to investigate if anything calls into question the validity of their licence.  Before completing this form, please read [this](https://www.orr.gov.uk/media/15948/download) guidance first to learn more about the Suspension or Withdrawal of Train Driving Licences. Please only use this form to supply information to the Office of Rail and Road in relation to possible issues with the required conditions for holding a licence (For all other licencing enquiries, please contact [TDL.Applications@orr.gov.uk](mailto:TDL.Applications@orr.gov.uk) in the first instance)  Answer all the questions as fully as possible. We may contact you again to clarify the information provided, or for further information.   |  |  |  | | --- | --- | --- | |  | **Question** | **Enter your response here** | | 1. | Details of the person submitting this form | Full Name:  Job Title:  Employer Name:  E-mail Address:  Phone number:  Postal Address: | | 2. | Train driver’s full name |  | | 3. | Driving Licence Number |  | | 4. | Licence Expiry Date |  | | 5 | Driver’s date of birth (dd/mm/yyyy) |  | | 5. | Driver’s current home address | *(please also explain if there is any reason you believe ORR should not contact the driver directly about their licence conditions):* | | 6. | Is the driver still employed by you? | Yes  No  *If “no” – please provide details, including the reason they are no longer employed (e.g resignation, dismissal) the date the driver left and whether they have been re-employed elsewhere in a train driving role* | | 7. | When did the driver last drive a train on the GB mainline? |  | | 8. | When did the driver last attend a periodic medical assessment? What was the outcome? |  | | 9. | What specific event(s) have happened which are potentially relevant to the driving licence conditions? *(select all that apply)* | Alcohol  Drugs  Failed medical assessment  Failed psychological assessment  Missed medical appointment  Missed psychological appointment  Issue(s) arising from driver monitoring  Driver has died  No events  Other (please specify): | | 10 | If you selected “no events” at Question 9, please explain why you are contacting ORR about this train driving licence |  | | 11 | Please describe in full the event(s) you selected in question 9 above. Specifically, please tell us whether the driver was undertaking, or about to undertake, safety critical duties at the time of the event(s)  *(include the dates of all key events including any assessments, tests taken, test results and decisions)* |  | | 12 | Please describe why you consider that the driver may no longer meet all of the requirements for holding a train driving licence |  | | 13 | Have you already contacted a Railway Inspector employed by ORR about the incident(s) selected at question 9? | Yes  No  *If “yes” please provide the name of the ORR inspector* | | 14 | Has any action already been taken in relation to the train driving certificate? | Yes  No  *For either response, please describe your rationale below:* | | 15 | Has the driver (or driver’s representative) started an internal appeal with their employer which is related to the events in question 9 above? | Yes  No  If “yes” please provide details below, including the expected decision date for the appeal: | | 15 | Have adjustments been made to the driver’s duties or employment which are intended to address the event(s) described in question 9? |  | | 16 | Please tell us what supporting evidence you are attaching with this form.  *(select all that apply)* | Doctors or Medical report(s)  Psychological assessment report(s)  Other specialist report(s)  Emails or other correspondence  Investigation report(s)  Internal driver monitoring report(s)  Drug or Alcohol test results  Police report(s)  Appeal report(s)  Driver development plan(s)  other (please specify) | | 17 | If you are supplying drug or alcohol test results, please provide full details of the process(es) followed, the results and conclusions you have reached from the test results |  | | 18 | Who should ORR contact in future to discuss this driver and the content of this form? *(leave blank if this is the same as the details provided in Q1)* | Full Name:  Job Title:  Employer Name:  E-mail Address:  Phone number:  Postal Address: | | 19 | Date this form is submitted to ORR(dd/mm/yyyy): |  | |  |
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Send your completed form together with any supporting information to: [TDL.Applications@orr.gov.uk](mailto:TDL.Applications@orr.gov.uk)

(in the subject line please state “*Confidential Suspension or Withdrawal: {insert operator name*}”