

III ORGAN DONATION:
I WILL NOT DONATE ANY ORGAN

IV. IN CASE OF EMERGENCY NOTIFY:
NAME: ERLINDA
ADDRESS: B29 FLOODWAY TAYTAY RIZAL
TEL. NO.: 09109292631

LTO DRIVER'S LICENSE

LTO DRIVER'S LICENSE

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I. DL CODES
A MOTORCYCLE
A1 TRICYCLE
B UP TO 5000 KGS GVW/8 SEATS
B1 UP TO 5000 KGS GVW/9 OR MORE SEATS
B2 GOODS 3500 KGS GVW
C GOODS > 3500 KGS GVW
D BUS > 5000 KGS GVW/9 OR MORE SEATS
BE TRAILERS 3500 KGS
CE ARTICULATED C > 3500 KGS COMBINED GVW
M1-PL-MT/AT
M2-PL-MT/AT
N1-PL-MT/AT
N2,N3-PL-MT/AT
M3-PL-MT/AT
O3,O4-PL-MT/AT


II. CONDITIONS:
1. WEAR CORRECTIVE LENSES
2. DRIVE ONLY W/SPECIAL EQPT FOR UPPER/LOWER LIMBS
3. DRIVE CUSTOMIZED MOTOR VEHICLE ONLY
4. DAYLIGHT DRIVING ONLY
5. HEARING AID REQUIRED

Serial Number
317619419

2022/10/24

2022/10/24

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REPUBLIC OF THE PHILIPPINES

DEPARTMENT OF TRANSPORTATION

LAND TRANSPORTATION OFFICE

DRIVER'S LICENSE





2022/10/24

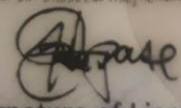
Last Name, First Name, Middle Name
EMPASE, HERMAN DINILA

Nationality	Sex	Date of Birth	Weight (kg)	Height(m)
PHL	M	1965/10/23	64	1.66

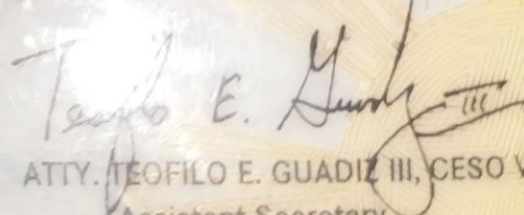
Address
MAESTRANZA COMP BARANGAY 656 INTRAMUROS
MANILA

License No.	Expiration Date	Agency Code
N04-94-311856	2027/10/23	D58

Blood Type B+	Eyes Color BLACK
DL Codes B,B1,B2,C,CE D	Conditions NONE



Signature of Licensee



ATTY. TEOFILO E. GUADIZ III, CESO V
Assistant Secretary