**HACKNEY CARRIAGE/PRIVATE HIRE VEHICLE LICENCE APPLICATION.**

Local Government (Miscellaneous Provisions) Act 1976

Town Police Clause Act 1847

***Please note that this application will not be accepted unless all sections have been completed and all original documents are enclosed***.

**Application** **Type** **(*Please tick relevant boxes*)**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  Hackney Carriage Vehicle  |  |  Private Hire Vehicle |
|  |  New Application  |  |  Renewal |

**Licence** **Details** **(*for******renewal******applications*)**

|  |  |
| --- | --- |
| Licence Number: |  |
| Date of Expiry: |  |

 **Applicant Details**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** | **Title:** |  ­­­Mr |   |  Mrs |   |  Miss |   |  Ms |   |  Other |   |
| **2.** | **Surname:** |  |
| **3.** | **Forenames:** |  |
| **6.** |  **Address:****Post** **Code:** |
| **7.** | **Telephone** **(Home):** |  |
| **8.** | **Telephone** **(Mobile):** |  |
| **9.** | **Email:** |  |

**Second Applicant Details (*if relevant*)**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** | **Title:** |  Mr |  |  Mrs |  |  Miss |  |  Ms |  |  Other |  |
| **2.** | **Surname:** |  |
| **3.** | **Forenames:** |  |
| **6.** |  **Address:****Post** **Code:** |
| **7.** | **Telephone** **(Home):** |  |
| **8.** | **Telephone** **(Mobile):** |  |
| **9.** | **Email:** |  |

**10. Vehicle Details**

|  |  |
| --- | --- |
| **Vehicle Registration Mark** | **Year of First Registration** |
|  |  |
| **Make & Model** | **Colour** |
|  |  |
| **Engine Size** | **Seating Capacity** |
|  |  |
| **Petrol**  | **Diesel** | **Dual / LPG** | **Other ­­­­­­­­­­­­­­­­­­­­­­** |
| **Wheelchair Accessible?**  | **Yes** |  | **No** |  |
| **Loading Ramp?**  | **N/A** |  | **Manual** |  | **Electric (If Electric please provide certificate)**  |  |
| **Is a 2-way radio fitted?**  | **Yes** |  | **No** |  |
| **Taxi Meter Fitted and calibrated to latest tariff charges Yes N/A** *If yes please provide details of who calibrated and when* |
|  |
| **Place where vehicle is normally kept overnight:** |
|  |
| **Has this vehicle been classed as a Category S sustaining structural damage but repairable (Category C prior to 1 October 2017) or a Category N non-structurally damage but repairable (Category D prior to 1 October 2017)?** If so you will need a satisfactory independent engineers report before we can accept this application. |
| **Yes** |  | **No** |  |

**11. Proprietor Business Details**

|  |  |
| --- | --- |
| **Trading As:** | **Telephone Number** |
|  |  |

**12. Details of Private Hire Operator (*Private Hire applicants only*)**

|  |  |
| --- | --- |
| **Operator Name** |  |
| **Operator Office Address** |  |
| **Telephone Number** |  |

**Declaration of Previous Convictions etc.**

|  |  |
| --- | --- |
| **13.** | **Have you been convicted, received a caution or fixed penalty notice for any offence other than motoring offences?** |
| **Yes** |  | **No** |  |
| **If you answered yes, please give details below including date of conviction and sentence/penalty:** |

|  |  |
| --- | --- |
| **14.** | **Do you have any driving and/or criminal prosecutions pending against you?** |
| **Yes** |  | **No** |  |
| **If you answered yes, please give details below including the hearing date:** |

|  |  |
| --- | --- |
| **15.** | **Have you ever had a Hackney Carriage / Private Hire Vehicle Licence refused / revoked / suspended by this or any other local authority?** |
| **Yes** |  | **No** |  |
| **If yes, please give dates and details:** |

|  |  |
| --- | --- |
| **16.** | **Declarations (*please read and tick each box*)** |
| I have read and understood the Private Hire/Hackney Carriage Licence Policy & Conditions and agree to abide by them. |  |
| I have enclosed with this application the relevant fee, or receipt number if already paid.  |  |
| I have enclosed with this application the appropriately dated insurance documents and Certificates of Compliance, Certificate of Compliance Check sheet, along with the relevant V5 Log Book in respect of the vehicle |  |
| I have enclosed the relevant expired vehicle licensing plates, or |  |
| I am aware that new plates will not be provided until any expired plates have been returned to the Licensing offices, or |  |
| This is a new to fleet vehicle application and I do not have current plates. |  |
| I am aware that if my vehicle is wheelchair accessible, it will be included on a list of designated vehicles under the Equality Act 2010 which will be published on the Council website. I am aware if I wish to appeal this vehicle being placed on the list, I can appeal under S172(4) of the Equality Act 2010, within 28 days of being placed on the list. |  |

|  |  |
| --- | --- |
| **17.** | **Signature and authority to collect information** |
| The information I have provided will be held by the Council on computerised and manual files (data will be made available on a public register as required by relevant legislation).This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud and to prevent/detect crime. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information on how your data is managed please see: <https://www.denbighshire.gov.uk/en/privacy/privacy.aspx> I hereby declare that the information given in this form is true, complete and correct and that I have no objections to and hereby authorise the council to make such enquiries as may be necessary to check the truth of that information, which will include requesting information from other services and Government departments. I authorise the Council to enquire and receive information relating to my licence and/or conduct matters.**I understand that it is an offence to make a false statement, or to omit relevant details, in this application and to do so can carry heavy penalties if convicted. Additionally my application may be refused, or my licence subsequently revoked, if statements are found to be incorrect.** |
| **Signature:** | (Applicant) | (Second applicant) |
| **Print name:** |  |  |
| **Date:** |  |  |

**YOUR** **APPLICATION** **SHOULD** **NOW** **BE** **SENT,** **WITH** **ALL** **SUPPORTING** **DOCUMENTS,** **TO:**

Email: licensing@denbighshire.gov.uk