

APPLICATION FOR THE INITIAL GRANT OF A PRIVATE HIRE VEHICLE OPERATOR'S LICENCE

WARNING

It is an offence for an applicant knowingly or recklessly to make a false statement or to omit any material information in order to obtain a licence. Such action will reflect on the suitability of the applicant to hold such a licence.

Please complete all sections	3
Full Details of Applicant	
Title: Mr/Mrs/Miss/Ms/Other	Name:
Address:	
	Postcode:
Telephone no:	Mobile no:
Email address:	
Date of birth:	Place of birth:
National Insurance No:	Do you have the legal right to work in this country? YES/NO
If the applicant proposes to state the name and address	o operate the vehicle(s) in partnership with any other persons, please of each partner.*
Title: Mr/Mrs/Miss/Ms/Other	Name:
Address:	
	Postcode:
Telephone no:	Mobile no:
Email address:	
Date of birth:	Place of birth:
National Insurance No: If required please continue on a sepa	
	oplication to any Local Authority for the grant or renewal of a Private Hire arriage Driver Licence refused , or had a licence revoked or suspended ?
If yes please give details:	
Name of Local Authority:	
Dates:	Type of Licence:
Decision & Reasons:	

Registered Company Details

Is the application being made in respect of a registered company?				YES / I	YES / NO		
If Yes please give deta	r secretary previously a		•				
	a. Nama.						
	ny Name:						
	ny Address:						
			Po	stcode:			
Telephone no:		Email a	address:				
Director's name an	d address:						
			Po	stcode:			
Secretary's name a	and address:						
			Po	stcode:			
If Yes, please give deta	y revocation or suspe	·		·	YES / NO		
	Secretary of the comp						
If required please conti	nue on a separate sheet*						
Business Premise	es						
Name of Private H	ire Company:						
Name which will be	e displayed on vehicle o	door signage:					
Business/Operating	g Address:						
			Po	stcode:			
="	no. at the operating address						
Have you obtained	planning permission to	o operate Priva	ate Hire Vehicles f	rom this address?	YES / NO		
If Yes, please state	the planning application	on no:					
If No, you cannot o	continue until you have	this in place o	r a letter confirmin	ng that permission	is not required.		

Does any person conne	ected with this app	olication hold eit	ther of these licence	es?	
Hackney Carriage Y	ES / NO	Private Hire	YES / NO		
If yes, please give brief	details:				
Issuing Authority:		Тур	oe of Licence:		
Date of Issue:		Da	te of Expiry:		
Issuing Authority:		Тур	pe of Licence:		
Date of Issue:		Da	te of Expiry:		
Issuing Authority:		Тур	Type of Licence:		
Date of Issue: If required please continue of		Da	te of Expiry:		
from the Police, whether Have you or any perso offences including driving	er or not it is spend n mentioned in th ng offences and fi	t within the term his application e ixed penalty offo	ever been convicted ences or received a	ted or received a formal caution ion of Offenders Act 1974. I in any court for any offence or formal caution? YES / NO arate sheet if necessary)	
Person	Date	Court	Offence	Penalty	
Please state number of (Please indicate number of v. 1 to 10 vehicles 11 to 50 vehicles 51 to 90 vehicles 91+ vehicles	n any mitigating ow.	ate from this cor	mpany:	tween 1 and 10)	

DECLARATION

In connection with the Council granting me a Private Hire Vehicle Operator's Licence, I undertake that:-

- a) I will comply with all other conditions, regulations and byelaws, copies of which I have received and read.
- b) I have read and understand the implications of the warning regarding the making of a false declaration in relation to this application and confirm that to the best of my knowledge the particulars I have provided with this application are correct.

Signed:		Date:
Name:		
Contact Name (where not previous application:	,	correspondence associated with this
		. Postcode:
Telephone no:	Email address:	
*Any additional provided must be attac	ched to this application and sig	ned and dated by the applicant.
Please return the completed form to:	Taxi Licensing City of York Council Eco Depot Hazel Court York YO10 3DS	
Our email address is licensing@york.ç	gov.uk Our telephone num	ber is (01904) 552422
The licence fee must be naid when	you return the application fo	rm

The licence fee must be paid when you return the application form.

This authority requires the requested information in order to process your application for a licence. It has a duty to protect and safeguard the public and therefore may share the information you have provided on this form with other service areas within the Council, Government Departments, law enforcement agencies and partners for these purposes. We take your privacy seriously. For details of the information we collect and how we use it, please see the Public Protection Privacy Policy on our website www.york.gov.uk.

This authority is under a duty to protect the public funds it administers. We may share information internally and externally with other organisations responsible for auditing or administering public funds, or where undertaking a public function, in order to prevent and detect fraud. We may also disclose information to a Specified Anti-Fraud Organisation for the purpose of preventing fraud under Section 68 of the Serious Crime Act 2007.

OFFICE USE ONLY

DATE	RECEIVED	O NI C	FFICE:

PRIVATE HIRE OPERATOR'S LICENCE NO.

FOR HOW MANY VEHICLES:

PERIOD OF LICENCE:-FROM: TO:

DATE ISSUED: SIGNED:

RECEIPT NO. FEE PAID: DATE PAID: