

Application for a licence to drive Hackney Carriage or Private Hire Vehicles

1 Standard applicant profile section	
1.1	Full Name
1.2	Full Postal Address
1.3	Main contact telephone number
1.4	Other telephone number
1.5	Email address
1.6	Please enter any previous names or maiden names
1.7	Date of Birth

Please complete all the questions on the form in **BLOCK capitals** and in **black ink**.
If you have nothing to record, please state "Not applicable" or "None".

2 Type of Application					
2.1	Type of application	New	<input type="checkbox"/>	Renewal	<input type="checkbox"/>
2.2	Duration of licence	1 year licence	<input type="checkbox"/>	3 year licence	<input type="checkbox"/>
2.3	Existing licence number				
2.4	Expiry date of current licence				

3 References – For new applicants only			
Please give the names and addresses of two referees we can contact as to your character and suitability for a licence. Referees must have known you for at least three years and should be a person of standing within the community. You are advised to include your present or last employer, but not your relatives or future employers.			
3.1	Reference 1	Name	
	Nature of relationship	Address	
3.2	Reference 2	Name	
	Nature of relationship	Address	
3.3	Current Driving Experience (in years)	Domestic only <input type="checkbox"/>	Previous taxi driver <input type="checkbox"/> Go to 3.4
		HGV <input type="checkbox"/>	PSV <input type="checkbox"/>
3.4	Which Authority did you hold a badge with? Please state badge number?		

4	Employment Details	
4.1	Name of Operator you will be working with	
4.2	Address	
4.3	Operator telephone number	
4.4	Email address	
4.5	Employment status (please tick)	Self employed <input type="checkbox"/> Salaried <input type="checkbox"/>
If you drive for more than one operator, state the name and address of the additional operator		
4.6	Name of additional Operator	
4.7	Address	

5	Driving Licence Particulars (as issued under the Road Traffic Act 1960 – 1972)	
5.1	How long have you held a full licence?	
5.2	Expiry date of current licence	
5.3	Full licence number	

6	Work Activity – (also refer to notes in Section 12 below)	
6.1	Do you have the right to work in the United Kingdom?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.2	For approximately how many hours will you be driving a Hackney Carriage or Private Hire vehicle?	Hours per day Hours per week
For Drivers who are employed or have an offer of employment by an Operator – complete sections 6.3 through to 6.5		
6.3	Does the Operator (named above) carry out regulated (or controlled) activity (e.g. school, hospital or care home transport)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.4	Is there any part of your employers business that you wish to be excluded from undertaking?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.5	If Yes, please give details of <u>all</u> such excluded activities	Wish to be excluded from undertaking
	Working from taxi rank	<input type="checkbox"/>
	Airport runs	<input type="checkbox"/>
	School runs under Norfolk County Council contract	<input type="checkbox"/>
	Hospital or care home transport	<input type="checkbox"/>
	Carriage of assistance dogs	<input type="checkbox"/> (also ensure 7.9 and 7.10 completed)
	Carriage of wheelchair bound passengers in a vehicle adapted for that purpose	<input type="checkbox"/> (also ensure 7.9 and 7.10 completed)

For Drivers who are self-employed / and others – complete sections 6.6 through to 6.7	
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6	Work Activity – (also refer to notes in Section 12 below)	
6.6	Will you/are you likely to be driving on a school, hospital or care home transport service?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.7	Is there any activity you wish to be excluded from undertaking (tick boxes as appropriate)	Wish to be excluded from undertaking
	Working from taxi rank	<input type="checkbox"/>
	Airport runs	<input type="checkbox"/>
	School runs under Norfolk County Council contract	<input type="checkbox"/>
	Hospital or care home transport	<input type="checkbox"/>
	Carriage of assistance dogs	<input type="checkbox"/> (also ensure 7.9 and 7.10 completed)
	Carriage of wheelchair bound passengers in a vehicle adapted for that purpose	<input type="checkbox"/> (also ensure 7.9 and 7.10 completed)

7	Medical	
7.1	Have you ever been advised by a medical practitioner, not to drive a motor vehicle on any medical grounds?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
7.2	If yes, please state reason(s)	
7.3	Awareness that Licensing Authority have ability to obtain medical records from doctor?	Yes <input type="checkbox"/>
7.4	Doctors name	
7.5	Address	
7.6	Main contact telephone number	
7.7	Have you ever had a driving licence revoked or refused for medical reasons?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
7.8	If yes, please state reason(s)	
7.9	Do you require an exemption from carrying assisting dogs or wheelchair passengers	Yes <input type="checkbox"/> No <input type="checkbox"/>
7.10	Grounds for exemption request	

8 Offences & Accidents (including driving offences)			
8.1	Have you ever been convicted of any offence(s)? Please refer to Note 14	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.2	If yes, please give details: (please use continuation sheet if necessary) If a continuation sheet is used please tick <input type="checkbox"/>	Date	
		Offence	
		Penalty/ fine	
8.3	Are you disqualified by a court from holding or obtaining a driving licence?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
8.4	If yes, please give date of period of disqualification:		
8.5	Name of Court:		
8.6	Have you ever been disqualified by a court from holding or obtaining a driving licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.7	If yes, please give date of period of disqualification		
8.8	Name of Court:		
8.9	Have you been involved in any motoring accidents in the last 3 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.10	If, yes, please give further details		
8.11	Have you ever been convicted of any driving related offences or have any endorsements?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.12	If, yes, please give further details		
8.13	We require your permission to check your driving history and entitlements with the DVLA. Please either log onto https://www.gov.uk/view-driving-licence and provide the single use code or provide your DVLA driver licence number, National Insurance Number and post code. Without this we will be unable to continue to process your application.	Single use code:	
		Or:	
		DVLA Licence Number:	
		National Insurance Number:	
		Postcode:	
		Signature:	

9	Standard declaration and signature section
9.1	<p>I declare that I have checked the information given on this application form and to the best of my knowledge and belief it is correct. I am not disqualified by reason of age or otherwise from holding or obtaining the licence for which I am now applying. If I have used continuation sheets, I have signed and dated each page.</p> <p>I undertake to read and understand the Hackney Carriage and Private Hire Handbook and, in the event of a licence being granted, will observe and perform the requirements contained therein at all times.</p> <p>This Authority is under 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. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. Your personal information may also be shared between Council departments and other agencies where we are legally required to do so.</p> <p>THIS FORM MUST BE FILLED IN COMPLETELY. THE APPLICATION WILL NOT BE CONSIDERED IF INFORMATION IS MISSING.</p> <p>IT IS AN OFFENCE FOR ANY PERSON TO KNOWINGLY OR RECKLESSLY MAKE A FALSE STATEMENT OR TO OMIT ANY PARTICULAR MATERIAL IN GIVING INFORMATION IN THIS FORM</p> <p>Signature</p>
9.2	Print Name
9.3	Date

10	Supporting Documentation Checklist	
	<p>This form should be completed and returned to Licensing Section, North Norfolk District Council, Holt Road, Cromer, Norfolk NR27 9EN.</p> <p>Please ensure the following documents are enclosed with application. Non compliance will result in application being returned as invalid.</p>	
10.1	Current DVLA Driving Licence	<input type="checkbox"/>
10.2	<p>Group 2 Medical Report.</p> <p>New applicants – required on application.</p> <p>For renewals – required every 6 years from previous Group 2 Medical Report issue date</p>	<input type="checkbox"/>
10.3	<p>Original Birth Certificate</p> <p>For new applicants only</p>	<input type="checkbox"/>
10.4	<p>Immigration Act 2016 – Right to Work Check</p> <p>We require for all drivers:-</p> <p>Current or expired British Passport</p> <p>or</p> <p>Full UK Birth Certificate accompanied by any appropriate documentation confirming your National Insurance Number</p> <p>Original documents only – photocopies are not acceptable</p> <p>Required for all new applicants and first renewals after 1st December 2016</p>	<input type="checkbox"/>
10.5	One recent passport sized photo (your photo can be taken at the NNDC office)	<input type="checkbox"/>
10.6	Appropriate Fee for application	<input type="checkbox"/>
10.7	<p>DBS Disclosure application form/fee and appropriate identity documents (as detailed in the DBS booklet <i>An Applicants Guide to completing the Disclosure Application Form</i>) for obtaining a Disclosure and Barring Service Records check.</p> <p>Required for all new applicants</p> <p>For renewals – required every 3 years from previous DBS certificate issue date</p>	<input type="checkbox"/>
	<p>This Authority will only accept Disclosure and Barring Service Disclosures issued via North Norfolk District Councils approved provider. Therefore, we do not accept another bodies disclosure i.e. Disclosures completed by Norfolk County Council. However, if you have signed up to the DBS Update Service within 19 days of receiving your disclosure from another body and you can provide us with your disclosure and give your signed permission for North Norfolk District Council to check the status, this may be acceptable although we still reserve the right to request a new DBS to be provided.</p>	

11	Preferred Payment Methods	
11.1	Debit/Credit Card (via website/telephone/in council offices) You must quote the following payment codes	Payment codes: 1 Year Licence:- 1171 8252 604058 3 Year Licence:- 1171 8252 604059 Receipt/reference number: Date payment made:
11.2	Cheque/postal order (via postal service/in council offices)	Payable to NNDC

12	Service Statement	
12.1	<p>NEW APPLICATION: A new licence will be issued within 7 working days upon receipt by this Licensing Authority, of an acceptable DBS Disclosure together with supporting documents and receipted references as required by this application. We allow up to 21 days for references to be received by referee.</p> <p>RENEWAL APPLICATION: We will process any renewal applications within 7 working days on receipt of a valid and acceptable application. Therefore, all applications and supporting documentation must be received by the Licensing Authority at least 7 working days prior to the expiry of your current licence to ensure that your licence is renewed in time.</p>	

13	DBS Check	
13.1	<p>For all taxi drivers an Enhanced Disclosure and Barring Service (DBS) check is required every 3 years from previous DBS Certificate issue date. (Formally known as CRB)</p> <p>To apply for an Enhanced Disclosure and Barring Service (DBS) check please ring and make an appointment with one of the Council's Licensing Officers who will be able to assist you with your application.</p>	

14	Rehabilitation of Offenders Act	
14.1	<p>Hackney carriage and private hire drivers are exempt from the Rehabilitation of Offenders Act 1974. This means that any convictions or cautions can be taken into consideration, even if they would ordinarily be considered 'spent', due to our obligation to ensure the safety of the public.</p> <p>Any decision to refuse a licence on the grounds on prior convictions will be made by our Licensing Committee following a hearing. The applicant will have a right of appeal against a decision to refuse an application.</p>	