Application for a Private Hire Vehicle Licence



Town Police Clauses Act 1847 Local Government (Miscellaneous Provisions) Act 1976

For Office Use only Expiry Date:		For Office Use only Receipt:			Ref. No.		
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	You M l	JST answer EVER	Y question in BLOCK (CAPITAL	. S .		
If ANY	questions are		t may not be possible t	•	our app	olication.	
		•	parate sheet if necessa	ry.			
Is this applicatio	n submitted or	n behalf of:-					
(i) A Sole Trade	r	(ii) A Partnership	(iii) A Privat	e Limited	Comp	any (Ltd)	
(iv) A Public Lim	nited Company	(PLC)		Please	tick a _l	ppropriat	e box
1a. Full Name of A	Applicant						
f this application is s	submitted on be	ehalf of (ii), (iii) or (iv) above. Please put	partnersh	ip or c	ompany n	ame belo
Private or Publ position within 2. Date of Birth			(eg. Director/Secre	tary/Ager	nt/Solid	citor) 4. Age	
5. If a Private or Pu	ublic Limited C	 Company, Company	/ Registration number				
6. Address of App	ĺ	, , , , , , , , , , , , , , , , , , ,	,				
o. Addiess of App	/// // // // // // // // // // // // //						
	Pos	stcode*	Tel	ephone*:			
	En	nail Address:					
Co. Componentari							
6a. Correspondend Address if differ to above							
	Po	stcode*	Tel	ephone*:			
		nail Address:		•			
7. Will the vehicle I	be used predo	ominantly or entirely	for private hire use ou	utside Rho	ondda	Cynon Ta	 f?
	No		ill be vehicle be used?				
				<u> </u>			
All Sections must	be answered	IN FULL.		Flare R	ef.:		

-							
	Postcode*		Te	elephone	*.		
	Email Address:						
9. Name(s) & Home Address(es) of other							
owner(s) or part							
owner(s)							
	Postcode* Telephone*:			*:			
	Email Address:						
10. Details Details of Moto You MUST complete to	ring Convictions (if a	any).* . If you ha	ave no convictio	ns - ansv	ver "n	one"	
Offence		Date of Conviction F		Fin	е	Penalty Points	
11. Details of Criminal Conv	rictions (if any). *		ı		ı		
Offence			Date of Conviction		I	Penalty Points	
(0	(: : : : : : : : : : : : : : : : :		l		1		

(Continue on a separate sheet if necessary)

8. Name & Address of licensed Private Hire Vehicle Operator

Vehicle Details
12. Private Hire Plate No.
13. Make & Model
14. Type (saloon, hatchback etc) 15. Cubic Capacity
16. Registration No. 17. Chassis No.
18. Date of First Registration 19. Colour
20. No. of Passengers to be carried
21. Is the vehicle adapted to transport disabled passengers? Yes No
22. Wheelchair Access Ramp (i) Tail Lift
(ii) LOLER Certificate Date
(must be current at time of application)
Certification In signing this application I am aware that if I knowingly or recklessly make a false statement or omit any material particular in giving information on this form, I will be guilty of an offence under the provisions of Section 57(3) of the Local Government (Miscellaneous Provisions) Act, 1976 and liable to a fine not exceeding £1000. I am further aware that submission and/or receipt of this application form does not authorise me to use the vehicle as a Private Hire and that to do so without formal issue of the necessary licence will be an offence under the above acts which may render me liable to prosecution.
Signed:* Print Name:
Signos.
Position in Company:* Date:
Declaration Information provided by you will be held and automatically processed on a computer system in line with the Data Protection Act 1998 (DPA), the European Convention on Human Rights (ECHR) and the Human Rights Act 1988 (HRA). The Council will take all reasonable precautions to ensure confidentiality to comply with the principles contained within these Acts. The information may be compared with other personal data

This form must be completed IN FULL and taken to the address below, together with:

held by the Council in order to aid prevention of fraud in the administration of public funds and may be used for cross authority comparison purposes. Under Section S29(2) of the DPA 1998 the Council is able to share information with other Government Departments for the prevention or detection of crime. By providing this information it is assumed that you give consent to use the information provided for the

above purpose.

THE REQUIRED FEE, A CURRENT CERTIFICATE OF INSURANCE, THE VEHICLE REGISTRATION DOCUMENT (LOG BOOK), A CURRENT MOT CERTIFICATE, (if applicable) A DEPOSIT FOR THE HACKNEY CARRIAGE VEHICLE PLATE (first application)

Applications are dealt with by appointment. Please contact the Licensing Team to arrange a suitable appointment.

FOR	R OFFICIAL USE OF	NLY					
1. Has this vehicle been previously licensed on	this plate	YES	NO				
2. If No is this application a Grant/Transfer/Replacement							
3. If Yes Previous Flare Reference Number							
4. Companies House Search Completed	YES	NO	NOT REQUIRED				
5. If Yes Company Name Verified	YES	NO					
6. Company Registration Number Verified	YES	NO					
7. If No reasons for non-verification							
8. Vehicle Type: Purpose Buil	t	Adapted	Other				
9. Licensable life of vehicle:		End Date:					
10. Visual Inspection of Vehicle (comments)		Date:					
	_ _	Officer:					
	_						

Licensing Team

Rhondda Cynon Taf County Borough Council,
Ty Elai, Dinas Isaf East, Williamstown, Tonypandy CF40 1 NY
Tel: 01443 425001 • Fax: 01443 425301 • Email: Licensing.Section@rctcbc.gov.uk