

OFFICIAL USE ONLY			
Expiry Date			
Licence No.			

PRIVATE HIRE VEHICLE OPERATORS LICENCE

Before completing this form please read notes overleaf.

FULL NAME			
HOME ADDRESS			
TEL NO.			
DATE OF BIRTH			
NAME OF FIRM			
ADDRESS			
Have you previously held a	ın Operators Li	cence? Yes/N	No* (if yes, give details)
Have you previsouly had an Operators Licence refused:			lo* (if yes, give details)
 3. Have you previously had an Operators Licence revoked/suspended? Yes/No* (if yes, give details) 4. Have you (or if the application is in the name of a limited company any Directors of 			
that company) ever been		onvicted of a cri	
Offence	Date of 0	Conviction	Penalty
I certify that all the details give	n are true to the	e best of my kno	owledge and belief.
I have read the Council Policy certify that I will comply with al			Private Hire Licensing and
Signed:	Date:		
Print:		Position:	

* Delete as appropriate

NOTES

- 1. A separate form must be completed by each applicant/part proprietor.
- 2. The information given on this form will be treated as confidential.
- 3. The fee must be paid before the licence is granted.
- 4. This form should be returned to the Licensing Team, Civic Centre, Victoria Road, Hartlepool, TS24 8AY
- 5. If any person in making application for a licence knowingly or recklessly makes a false statement or omits any material particular, he/she shall be guilty of an offence (Local Government (Miscellaneous Provisions) Act 1976 Section 57).
- 6. 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. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information, see www.hartlepool.gov.uk/licensing or contact Mr Noel Adamson, Head of Audit and Governance on 01429 266522 ext 3173.

FOR OFFICIAL USE ONLY				
Signature:	Licence issued:			
Licence Start Date:	Expiry Date:			

Private Hire Operators Licence Application

Additional Information (if applying as a Limited Company)

I Mr/Mrs/Miss
Address
Postcode Tel No
having applied for a Private Hire Operators Licence in the following Limited Company Name/Names
State the following person/s is/are (delete as applicable) associated with the Company. Please include all Company Directors, Managing Director and Company Secretary.
Position
Position
Position
Position
I declare that the above information is true
I understand the Hartlepool Borough Council will carry out any necessary check in order to satisfy itself that the Company is fit and proper to hold a licence
Name
Position
Date