



	Renewal vehicle	
	New vehicle	wef
	Replacement vehicle	wef

OFFICIAL USE ONLY
LICENCE NUMBER:
EXPIRY DATE:
6 YEAR'S ON:
FEE:

PRIVATE HIRE VEHICLE LICENCE APPLICATION

Before completing this form please read the notes overleaf.

	Applicant	Part Proprietor
FULL NAME:		
ADDRESS:		
TELEPHONE NO:		
DATE OF BIRTH:		
EMAIL ADDRESS:*		

* If you would like us to correspond with you by email please provide your email address

Vehicle Make			
Model		Petrol/Diesel (delete as appropriate)	
Colour		Number of Passengers	
Registration Number			
Date of first Registration		Wheelchair Accessible? YES/NO	

If replacement vehicle, please give registration number of vehicle to be replaced. (see note 11)

I certify that the above details are to the best of my knowledge, a true and correct record.

I give consent for a copy of my vehicle licence to be provided to my insurance company upon request.

I have read the Council Policy relating to Hackney Carriage/Private Hire Licensing and certify that I will comply with all terms and conditions therein.

Signed:..... Date:.....

Vehicle Operator Details

Company Stamp

Name: _____

Address: _____

Signed: _____ Dated: _____

