

Operator Licence Application Form

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1976

**PLEASE ENSURE YOU READ AND UNDERSTAND EACH SECTION OF THIS FORM
THE FORM MUST BE COMPLETED IN FULL BEFORE IT WILL BE ACCEPTED.
INCOMPLETE FORMS WILL BE REJECTED**

1. APPLICATION TYPE	
<p>NEW <input type="checkbox"/></p> <p>Application for:</p> <p>1 year (£125.00) <input type="checkbox"/></p> <p>5 years (£495) <input type="checkbox"/></p>	<p>RENEWAL <input type="checkbox"/></p> <p>Operator Licence Number: O</p> <p>Expiry Date: / /</p> <p>Application for:</p> <p>1 year (£125.00) <input type="checkbox"/></p> <p>5 years (£400) <input type="checkbox"/></p>
<p>Change of Operating Address</p> <p><input type="checkbox"/> 5 years (£400) <input type="checkbox"/> 1 year (£125.00) <input type="checkbox"/></p>	
2. APPLICANT ONE	
<p>Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state): _____</p> <p>Forenames: _____ Surname: _____</p> <p>Address: _____</p> <p>_____</p> <p>Telephone Number: _____</p> <p>Email Address: _____</p> <p>Do you have the right to work in the UK? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Do you have any restrictions or time limits on your eligibility? YES <input type="checkbox"/> NO <input type="checkbox"/> (If answering YES please give details below)</p> <p>Have you ever received a conviction, caution or warning? YES <input type="checkbox"/> NO <input type="checkbox"/></p>	
2a. PREVIOUS LICENCES	
<p>Are you currently licensed or have you ever been licensed by any licensing authority before? (Including HDC)</p>	

YES

NO

If YES please state which authority:

Have you ever had a licence to drive a Hackney carriage or Private Hire Vehicle refused, revoked or suspended?

YES

NO

Have you ever had a Private Hire Operators licence refused, revoked or suspended?

YES

NO

3. APPLICANT TWO (If Applicable)

Title: Mr Mrs Miss Ms Other (please state): _____

Forenames: _____ Surname: _____

Address: _____

Telephone Number: _____

Email Address: _____

Do you have the right to work in the UK? YES NO

Do you have any restrictions or time limits on your eligibility? YES NO
(If answering YES please give details below)

Have you ever received a conviction, caution or warning? YES NO

3a. PREVIOUS LICENCES - APPLICANT TWO ONLY

Are you currently licensed or have you ever been licensed by any licensing authority before?
(Including HDC)

YES

NO

If YES please state which authority:

Have you ever had a licence to driver a Hackney carriage or Private Hire Vehicle refused, revoked or suspended?

- YES
- NO

Have you ever has a Private Hire Operators licence refused, revoked or suspended?

- YES
- NO

4. VEHICLES

Total Number of vehicles you Operate: _____

State licence number and vehicle registration for each vehicle (complete on a separate sheet if necessary):

5. DETAILS OF OPERATING BUSINESS

Name of Company/Business: _____

Operating Address: _____

Telephone Number: _____

Email Address: _____

Website Address: _____

Will you operate any satellite offices?

- YES
- NO

(If YES please provide address details below)

Operator Stamp:

DECLARATIONS GENERAL

1. I understand that any licence issued will be subject to the provisions of:
 - i. the Local Government (Miscellaneous Provisions) Act 1976
 - ii. the Council's licence conditions
2. I accept that any licence issued to me will belong to the Council, and if lost or damaged, I will be liable for the cost of replacement.
3. I understand that it is an offence under the terms of the Local Government (Miscellaneous Provisions) Act 1976, Section 57(3) knowingly or recklessly to make a false statement or to omit any information required in this form. This will affect the decision whether I am fit and proper to hold a licence.
4. I understand that any criminal convictions, civil convictions and/or endorsements or cautions must be notified to the Licensing Authority within 7 days of date of conviction.
5. I understand that any changes to any other particulars must be notified in writing to the Licensing Authority within 7 days of the change.
6. By signing the declaration at page 4 below you are declaring that you are entitled to work in the UK and are not subject to a condition preventing you from doing work relating to the carrying on of a licensable activity. You understand that your licence will become invalid if you cease to be entitled to live and work in the UK.

PRIVACY NOTICE

All personal information that you provide us is managed in accordance with our Privacy Policy. Please visit the Privacy Notice for Community- Regulation and Enforcement on our website where you can find out information about how we handle your information and your rights of access.

The information that you provide on this form and that obtained from other relevant sources (such as the DBS check) will be used to process your application for a Private Hire operator licence.

The information contained in this form is correct to the best of my knowledge and belief. It is an offence knowingly or recklessly to make a false statement in or in connection with an application for grant of a licence. (A person is to be treated as making a false statement if he produces, furnishes signs or otherwise makes use of a document that contains a false statement). To do so could result in prosecution and a fine of any amount.

By signing below you confirm that you have read and agree to the statements in this application form.

Signed: _____ Date: / /

Signed: _____ Date: / /

RENEWAL APPLICATIONS MUST BE SUBMITTED BEFORE THE EXPIRY DATE OF THE CURRENT LICENCE. FAILURE TO DO SO WILL RESULT IN THE APPLICATION BEING TREATED AS A NEW APPLICATION.

Operating Check List – NEW APPLICANT	
Completed Application Form	<input type="checkbox"/>
Basic Criminal Record Disclosure for each person applying <i>No more than 3 months old</i>	<input type="checkbox"/>
Proof of Public Liability Insurance <i>5 Million Minimum – ONLY if proving a waiting room</i>	<input type="checkbox"/>
Payment	<input type="checkbox"/>
Operating Check List – RENEWAL APPLICANT	
Completed Application Form	<input type="checkbox"/>
Payment	<input type="checkbox"/>
SUBMITTING THE APPLICATION	
Return the completed application to Huntingdonshire District Council by post or hand to: Licensing Section Pathfinder House St Mary's Street Huntingdon Cambridgeshire PE29 3TN All queries should be address to licensing@huntingdonshire.gov.uk	