



Application for New / Renewal of Private Hire Operators Licence

Local Government (Miscellaneous Provisions) Act 1976

All questions set out below **must** be answered by the applicant.

Please use block capitals.

1. APPLICATION TYPE

Please indicate the type of application
Tick the appropriate box

New Licence

Renewal

If renewal, please state:

Expiry date

Current Licence No

2. PERSONAL DETAILS

(Mr/Mrs/Miss/Ms)

Home Address

First Names

Surname

Maiden Name

or

Previous Surname

Home Tel No

Work Tel No

Mobile Tel No

Date of Birth

National
Insurance No

3. BUSINESS DETAILS

Name under which the business is to be operated

Address from which the business is to be operated

Business Telephone number

Give details below of Private Hire Vehicles which will be operated by you

| Make & Model of vehicle | Registration Number | Max. No of persons to be carried | MHDC Licence No | Radio Controlled Yes/No |
|-------------------------|----------------------|----------------------------------|----------------------|-------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Where will your vehicle(s) be garaged or kept when not in use for private hire purposes?

Have you obtained planning permission in respect of:

- 1) The premises from which the business is to be operated? Yes No
- 2) The premises where all the vehicles will be garaged Kept or serviced? Yes No

4. OPERATION

A) Will you provide a full and regular hire service at all reasonable times?

B) How many full-time private hire drivers do you employ?

C) How many part-time private hire drivers do you employ?

D) Number of hours per day that vehicle(s) will be available for hire?

E) Will you be in charge of the daily operation of the business?

5. APPLICATION

(A) Have you previously applied to any Council for an Operators Licence? *(Please tick box)*

Yes No *(if YES, please provide details on a separate sheet)*

(B) Has any Operators Licence held by you ever been revoked or suspended?

Yes No *(if YES, please provide details on a separate sheet)*

(C) Have you been convicted of any offence in any court?

Yes No *(please tick box)*

(If the answer is YES, details of convictions must be given (except details of "spent" Convictions as provided under the rehabilitation of offenders Act 1974).

| Offence | Date of Offence | Date of Court | Date of Conviction | Penalty |
|---------|-----------------|---------------|--------------------|---------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Have you been involved in any incident which may lead to Court Proceedings being taken Against you?

Yes No *(If YES, please provide details on a separate sheet)*

Do you currently hold an Operators' Licence with another Authority?

Yes No *(If YES, please provide details on a separate sheet)*

COMPANIES OR PARTNERSHIPS

Are you (or have you ever been) a Director or Secretary of any company (or a partner in any firm) Which holds (or has held) an Operators Licence?

Yes No

If YES, please provide, (on a separate sheet of paper if necessary) full details of the following:

- i) Name of Company/Firm
- ii) Name and address of all Directors/Secretaries/Partners
- iii) Any revocation or suspension of any Licences held by any of the named Companies/Firms/ Directors/Secretaries/Partners

Please provide answers on a separate sheet, to the questions detailed in sections 5i) & 5ii) above

6. DECLARATION

I authorise the Council to cross check the information I have given, with other sections within the Council, Rent Officer, other Council's and Benefit Authorities.

I declare that all the above details are, to the best of my knowledge correct

Signed

Date

 / /

IMPORTANT

If any persons knowingly or recklessly makes a false statement or omits any material particular in giving information in connection with this application, he shall be guilty of an offence and shall be Liable on summary conviction to a fine not exceeding £100.

7. APPLICATION CHECKLIST - *IMPORTANT*

After you have filled in this form, tick the boxes below to show that you have attended to the following:

Enclosed the fee

Signed the Declaration

IMPORTANT

AN INCOMPLETE APPLICATION WILL DELAY THE ISSUE OF YOUR LICENCE

Please return to:
Licensing Section, Malvern Hills District Council, The Council House,
Avenue Road, Malvern, Worcs. WR14 3AF.