



PH/01  
Application for  
New / Renewal of Private Hire  
Vehicle Licence

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

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

Postcode

Mobile Tel No

Date of Birth

National  
Insurance No

E-mail Address

Name of Private Hire  
Operators Business

Address of Private Hire  
Operators Business

Operators Licence Number

### 3. DETAILS OF VEHICLE

Make of vehicle

Model of vehicle

c.c.

Registration number

Petrol/Diesel

Colour of vehicle

Date of Registration

 /  / 

Chassis number

Engine number

M.O.T. Certificate  
Number and  
Expiry date

 /  / 

Is your vehicle Wheelchair/Disabled accessible?

Yes

No

Number of passengers (excluding driver)

If yes, please  
give details

### 4. DETAILS OF INSURANCE OF VEHICLE

Name of Insurance company

Address of Insurance company

Telephone number

Policy number

Type of Insurance  
(Fully Comprehensive/Third Party)

Expiry Date of Insurance

## 5. DETAILS OFVEHICLE OWNERSHIP

Are you the sole owner of the vehicle?

Yes

No

If you are not the sole owner of the vehicle, please give below the name and address  
Of the owner and all co-owners of the vehicle

Name and  
Address of  
Sole owner

Name and  
Address of  
co-owner

Where will the vehicle be kept when not in use?

## 6. APPLICATION CHECKLIST - IMPORTANT

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

Enclosed

(Please tick)

The fee (please check current fee table)

Vehicle Registration Document (or proof of ownership)

Vehicle Insurance Certificate

M.O.T. Certificate

(You will need to supply your current and your new M.O.T. Certificates)

Signed the Declaration

\*Please make cheques payable to Malvern Hills District Council

## 7. 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/she shall be guilty of an offence and shall be Liable to prosecutions.

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