

**APPLICATION TO RENEW HACKNEY CARRIAGE  
&/or PRIVATE HIRE DRIVERS LICENCE**



PO Box 13 Chorley  
PR7 1AR  
Tel: 01257 515151

**PLEASE COMPLETE IN BLOCK CAPITALS & COMPLETE ALL BOXES MARKED WITH A \***

<b>IMPORTANT</b>			
<p>The Council cannot renew a licence that has already expired. You may make an application to renew a licence up to 3 months prior to the expiry date and you are advised to make the application no later than 1 month prior to expiry to avoid delays in granting the renewal.</p> <p>It is an offence under Section 57(3) of the Local Government (Miscellaneous Provisions) Act 1976 for any person to knowingly or recklessly make a false statement or omit any material particulars in giving the required information</p>			
<b>IDOX Reference:</b>			
*Mr / Mrs / Miss / Ms	*All Forenames:		*Surname:
*Address			Post Code
*Telephone Number		E-mail Address	
*Drivers Badge Number/s:	PHD	Expiry Date:	
	HCD	Expiry Date:	
*Do you have a valid right to work and reside in the UK?			Yes      No
<p><i>If yes you must produce an original EEA Passport or original UK issued birth certificate- where you are unable to provide these documents then the Council will consult with the Home Office to confirm the applicant's status and right to work and reside.</i></p> <p><i>If No the application will be referred to the relevant Licensing Committee for determination.</i></p>			
*Do you intend to drive other proprietor's vehicles?			Yes      No
If Yes please provide the Name of any Proprietor/Operator you intend to work for.			
*Do you intend to operate a wheelchair accessible vehicle?			Yes      No
<p><b>If Yes, you are required to undertake the DSA Enhanced Wheelchair Assessment and your drivers badge will reflect this. See DSA Assessment Guidance Notes for more information.</b></p>			

<b>Details and Declaration of convictions, cautions and pending prosecutions The Rehabilitation of Offenders Act 1974 Local Government (Miscellaneous Provisions) Act 1976</b>		
*Have you ever been convicted at a court for <b>any</b> criminal offence or civil matter?	Yes	No
*Have you ever been cautioned by the Police or any other authority for any reason?	Yes	No
*Do you have any traffic convictions (this includes any fixed penalty notices received)?	Yes	No
*Have you ever attended a speed awareness course?	Yes	No
*Are there any pending matters, including criminal, civil or traffic offences, for	Yes	No

which you are being investigated by any authority either in the UK or in any other country?		
*Have you previously held a licence to drive Hackney Carriages/Private Hire Vehicles with Chorley Council?	Yes	No
*Have you ever had a licence for Hackney Carriages/Private Hire driver, proprietor licence or an operators' licence, refused, suspended or revoked?	Yes	No

**If you answered "Yes" to any question above, please give a full explanation, including any civil or pending matters:**

(Continue on a separate sheet if necessary)

<b>Declaration of Convictions, cautions and pending prosecutions details- including motoring, criminal and civil matters</b>				
<b>Date Convicted</b>	<b>Type of Conviction (Criminal, motoring, fixed penalty, caution or pending matter)</b>	<b>Court or Police</b>	<b>Offence or pending matter</b>	<b>Penalty</b>
<i>Example: 27/8/14</i>	<i>Example: Motoring – fixed penalty</i>	<i>Example: Police</i>	<i>Example: SP30- exceeding the statutory speed limit</i>	<i>Example: 3 points and a £60 fine</i>

<b>Declaration of Medical Conditions</b>		
<b>In all cases you must also provide a medical form completed by your GP</b>		
*Do you use any none prescription drugs or medication?	Yes	No
*Have you any medical condition that would prevent you from conveying dogs or that would affect your ability to act as a licensed HC / PH driver?	Yes	No
*Have you any medical conditions or illnesses that are currently being investigated?	Yes	No
<b>If you answered "Yes" to any question above, please give a full explanation, including any civil matters:</b>		
(Continue on a separate sheet if necessary)		

**DECLARATION**

<b><u>I understand that:</u></b>	<ul style="list-style-type: none"> <li>▪ My application is subject to an Enhanced Disclosure and Barring Services (DBS) Check.</li> <li>▪ My application is subject to a satisfactory medical.</li> <li>▪ My DBS and Medical may be deemed invalid after 3 months from the date of receipt, if all other supporting information has not been provided by this time.</li> <li>▪ My application will be deemed invalid after 6 months from the date of receipt if all the satisfactory supporting information has not been provided by this time.</li> <li>▪ I am required to inform the Council within 7 days of any medical conditions that arise during the currency of my licence</li> <li>▪ I am required to inform the Council within 7 days of being charged for a criminal offence, convictions, fixed penalties, cautions, civil matters or motoring offences that I receive during the currency of my licence</li> <li>▪ Chorley Council 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 within this authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes. For further information, see <a href="http://www.chorley.gov.uk/dataprotection">www.chorley.gov.uk/dataprotection</a> or contact the Audit and Risk Team on 01257 515466.</li> </ul>
<b><u>I declare that:</u></b>	<ul style="list-style-type: none"> <li>▪ To the best of my knowledge and belief, the answers I have given are true and I understand that if I knowingly or recklessly make a false statement or omit any material particular required on this form that I shall be guilty of an offence and liable to prosecution.</li> <li>▪ I can confirm that I have informed my doctor of any issues affecting my health</li> </ul>

**Print Name:**

**Signed:**

**Dated:**



**Mandate for the release of Information in Accordance with the provisions of the  
Data Protection Act 1998**

First Name:															
Surname:															
Date of Birth:															
Address:															
DVLA driving Licence Number:															

**Declaration:**

Being the person named above, I authorise Chorley Council to ask the DVLA for my driver record information as and when they require, at a frequency they shall determine.

I authorise and direct the DVLA to disclose to Chorley Council all relevant information relating to my driver record from the computerised register of drivers maintained by the DVLA. This includes personal details, driving entitlements, endorsement details, disqualifications, convictions, photo images and CPC details (where applicable). Medical information is not to be provided.

This authority will expire when I cease to drive in connection with Chorley Council and in any case three years from the date of the grant of my licence.

**Print Name:**

**Signed:**

**Dated:**

Applicant Checklist- tick this column only	All documents below must be presented for inspection- ONLY ORIGINAL DOCUMENTS WILL BE ACCEPTED				
Checklist to be completed by Customer Service- all documents to be copied and attached to IDOX record					
1	EEA/UK passport	Where not produced to verify right to work and reside, refer to Home office before processing application		Recorded and checked by Customer Services	(Initials of CSO)
		Passport No : <input type="text"/>			
		Expiry date: <input type="text"/>			
<b>OR</b>					
2	UK Birth Certificate	Where not produced to verify right to work and reside, refer to Home office before processing application		Recorded and checked by Customer Services	(Initials of CSO)
		No: <input type="text"/>			
<b>AND</b>					
3	Recent Utility Bill	To verify current address- dated within 3 months of application		Recorded and checked by Customer Services	(Initials of CSO)
		Company : <input type="text"/>			
		& Ref: <input type="text"/>			
4	Full DVLA issued driving licence	Licence No: <input type="text"/>		Recorded and checked by Customer Services	(Initials of CSO)
		<input type="text"/>			
		Issue No: <input type="text"/>			
		Group B Expiry: <input type="text"/>			
7	Enhanced DBS- Chorley Council issued	This must be dated within 3 months of the application. Where issues identified refer to Licensing		Recorded and checked by Customer Services	(Initials of CSO)
		Ref: <input type="text"/>			
		Date of issue: <input type="text"/>			
8	Chorley Council Group II Medical	This must be completed within 28 days of the application and signed by own GP. Where issues identified refer to Licensing		Recorded and checked by Customer Services	(Initials of CSO)
		Dr Registration No: <input type="text"/>			
		Date completed: <input type="text"/>			
9	DATA Protection Mandate	Signed and dated <input type="text"/>		Recorded and checked by Customer Services	(Initials of CSO)
10	HCD Renewal 4120/60085	£122.13	<input type="text"/>	Recorded and checked by Customer Services- scan receipt	(Initials of CSO)
11	PHD Renewal 4120/60085	£184.42	<input type="text"/>		
12	Dual Badge Renewal 4120/60085	£113.67	<input type="text"/>		
Date Licence granted <input type="text"/>			<b>OR</b>	Date of referral to Licensing- advise applicant <input type="text"/>	<input type="text"/>