

Licensing Section, PO Box 13, Chorley, PR7 1AR Telephone 01257 515151 - Fax 01257 515150

You are advised to read the notes before completing this form

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1976 Section 47

APPLICATION FOR HACKNEY CARRIAGE VEHICLE LICENCE GRANT

(Restricted to Existing Proprietors only)

All boxes marked with a * must be completed by applicant

IDOX Reference:				
*Full name of applicant(s) (Proprietors) (The names of the vehicle's registered owner and all persons concerned in the hiring of the vehicle must be given) (see note (i))				
*Address(s) of applicant(s) (Proprieto				
*Home Telephone &/or Mobile No:	Po	st Code:		
·				
E-mail: (Please continue on a separate sheet	if necessary)			
What is the trade name, address & te	lephone number of business?			
Where applicable, what is the name,	address & telephone number of the private	hire operator for	this vehicle?	
*Please provide Vehicle Registration notes)				
*Is the application for a Disabled According	Yes	No		
State preferred choice of testing station				
Preferred time for appointment (See r				
Please mention any dates/times when for testing (see note (v))				
* Meter make	*Serial No:	*Please provide calibration certificate for the meter		
Are you presenting a trailer to be use	d in conjunction with the vehicle (See notes)	Yes	No	

Vehicle Checklist- to be completed by the Inspecting Officer						
	The vehicle must be presented for testing within 7 days of the date of this inspection					
Officer Name:	Date & Time of Inspection:					
Vehicle Make:	Model:					
Colour:	Passenger Ca	apacity:	No of Doors:			
Recorded Mileage:	Name of pers	son presenting the	Vehicle:			
Date of first UK registration (taken from V5)						
Petrol/Diesel/LPG/Hybrid						
Is the vehicle Wheelchair Accessible?	Yes		No			
Does the Vehicle meet Disabled Access Criterion?	Yes		No			
Does the vehicle meet current requirements for: Condition of Exterior	Yes	No- give reasons:				
Does the vehicle meet current requirements for: Condition of Interior	Yes	No- give reasons:				
Please record any dents or scratches etc t						
Please record any documents provided in support of the application (E.G. engineers reports, Service Records)						
Is the Vehicle presented suitable for Licensing?		Yes No				
If no give reasons for rejection:	·					

Applicant	Checklist to be c	ompleted	d by Customer	Service- all do	ocuments to be copied an	d attached to
Checklist-	IDOX record	ompicie	a by Gustomer	oci vice- ali uc	beaments to be copied and	a attached to
tick this	IDOX record					
column only						
1	Vehicle Registrati	on	See Notes		Recorded and checked	(Initials of
	Document (V5)				by Customer Services	CSO)
2	Meter Verification		Valid Calibration	n Certificate	Recorded and checked	(Initials of
_			provided		by Customer Services	CSO)
The Council mus	st have sight of the or			nd schedule or c	over note which indicates the v	,
	~	~			either, public hire, private hire	
the licence can b	be granted. However,	an applica	ation can still be p	rocessed but the	plate cannot be issued until th	is section is
completed.						
	Name of Insurance	e			Recorded and checked	(Initials of
	company				by Customer Services	CSO)
						,
	Policy Number				Recorded and checked	(Initials of
					by Customer Services	CSO)
	Registration No of				Recorded and checked	(Initials of
	on Insurance Cert				by Customer Services	CSO)
3	/Schedule/ cover i		Public Hire		Recorded and checked	(Initials of
3	Schedule/ cover n				by Customer Services	CSO)
	states insured for		Private Hire		by Customer Services (CSO)	
	passenger use		Both			
	-				Observation described	/l::::::::::::::::::::::::::::::::::::
	Valid from		Valid to		Checked and recorded	(Initials of
					on IDOX by Customer Services	CSO)
	Where Named Dr	ivor on	Name of Driver & Badge		Recorded and checked	(Initials of
	Insurance Certific			o bauge	by Customer Services-	CSO)
	Schedule/ cover n		Numbers:		Driver must have	333)
	Scriedule/ Cover i	iole			appropriate Chorley	
					badge	
4	4120/60085	HCV lice	ence grant	£110.24	Recorded and checked	(Initials of
5	4120/60228	MOT	chice grant	£54.85	by Customer Services-	CSO)
	20,00220			201.00	scan receipt	<u> </u>
6	4120/60229	Vehicle	Test (inc VAT)	£10.25	Total Payment =	
7		Poor Lie	cence Plate &	£11.40 +	C215 94	
<i>'</i>	4120/60085	Livery	Lence Flate &	£11.40 + £29.10	£215.84	
	ND Failure to a				essing your application.	I

NB. Failure to answer all questions will cause delay in processing your application.

Declaration: I declare I have never been refused the grant or renewal or have never had a licence revoked for a Hackney Carriage or Private Hire vehicle with this or any other authority. The Vehicle for which this licence application is made is not licenced as a Hackney Carriage or Private Hire vehicle with any other authority. I confirm that I am the registered keeper of the vehicle. I confirm that the New Keeper Supplement of the Vehicle Registration Document (V5) has been completed with my name and address (or in the name of a company for which I am authorised to act for), and sent to the DVLA in accordance with the legal requirements.

Print Name:	Signed:	Dated:			
(Any Additional Proprietors Sign below)					
Print Name:	Signed:	Dated:			
Print Name:	Signed:	Dated:			

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