



COLCHESTER BOROUGH COUNCIL

PLATE NUMBER

APPLICATION FOR A LICENCE TO PLY FOR HIRE WITHIN THE BOROUGH OF COLCHESTER

Town Police Clauses Act 1847 as amended by The Local
Government (Miscellaneous Provisions) Act 1976

I AM THE PROPOSED OWNER OF A HACKNEY CARRIAGE VEHICLE AS MENTIONED
BELOW AND HEREBY MAKE APPLICATION TO TRANSFER THAT VEHICLE'S
LICENCE INTO MY NAME

1 TO BE COMPLETED BY THE PROPOSED LICENCE HOLDER

TITLE MR / MRS / MISS /MS / OTHER.....

FIRST NAMES.....
(Block Letters)

SURNAME.....
(Block Letters)

ADDRESS

.....

.....

2 TELEPHONE NUMBERS

Home Tel:..... Business Tel:

Mobile Tel: Fax Tel:

'E' Mail No:

3 FULL DETAILS OF ANY PROPOSED PART LICENCE HOLDER OF THE HACKNEY CARRIAGE

TITLE	FIRST NAME	SURNAME	ADDRESS	TEL No

(ONLY TWO NAMES FROM THIS SECTION CAN BE ENTERED ON THE LICENCE) (Drivers are entered at 4)

4 GIVE THE FULL NAMES OF EVERY PERSON WHO WILL DRIVE THE VEHICLE FOR HIRE AND REWARD.

TITLE	FIRST NAME	SURNAME	ADDRESS	TEL No

5 HAVE YOU OR ANY PERSON NAMED IN THIS APPLICATION EVER BEEN CONVICTED OF ANY OFFENCE IN ANY COURT OR CAUTIONED BY THE POLICE FOR ANY OFFENCE. YES / NO

IF YES SHOW DETAILS BELOW: -

(The details of any convictions declared which are 'spent' (as defined by the Rehabilitation of Offenders Act 1974) are not normally considered unless deemed as relevant to this renewal).

OFFENCE	COURT / POLICE	DATE	PENALTY /CAUTION

Any convictions received after completion of this form must be reported within seven days in writing to the Licensing Officer Angel Court High Street Colchester CO1 1FL

6 ARE THERE ANY PROSECUTIONS / FIXED PENALTY FINES PENDING AGAINST YOU OR ANY OTHER PERSON NAMED IN THIS APPLICATION? YES / NO

If 'YES' give details as requested below.

SUMMONS/FIXED PENALTY DATE	COURT APPEARING AND DATE	ALLEGED OFFENCE

7 VEHICLE DETAILS

PLATE No. REGISTRATION No. MAKE.....

MODEL..... COLOUR..... TYPE OF BODY.....
(Saloon/ Estate / Hatchback)DATE OF 1 ST REGISTRATION No OF SEATS.....
(Excluding driver)

M.O.T No. STARTS. EXPIRIES.....

INS No. STARTS. EXPIRIES.....

CONVERTED FOR THE DISABLED..... YES / NO SEAT BELTS FITTED..YES / NO

WHERE IS VEHICLE NORMALLY KEPT.....

WHO IS THE OWNER OF THE VEHICLE

NAME OF THE PERSON YOU ARE DRIVING FOR

- 8 DO YOU HAVE A POLICY OF INSURANCE IN FORCE AS COMPLIES WITH PART VI OF THE ROAD TRAFFIC ACT 1988 FOR THE USE OF THE ABOVE VEHICLE FOR THE PUBLIC CARRIAGE OF PASSENGERS FOR HIRE OR REWARD? YES / NO**
(Production of your Certificate of Insurance or Cover Note is required)

IN THE EVENT OF A LICENCE BEING GRANTED TO ME I HEREBY UNDERTAKE: -

- 1) To observe all statutes, conditions, byelaws, orders and regulations for the time being in force relating to Drivers and the Driving of Hackney Carriages.
- 2) To display the badge provided by the Council in such a manner as to be plainly visible at all times when standing or plying for hire when engaged as a Hackney Carriage driver and using the vehicle for hire and reward.

APPLICANTS SHOULD BE AWARE THAT BY VIRTUE OF SECTION 57(3) OF THE LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1976, IT IS AN OFFENCE PUNISHABLE ON SUMMARY CONVICTION BY FINE TO KNOWINGLY OR RECKLESSLY MAKE A FALSE STATEMENT OR OMIT ANY MATERIAL PARTICULAR IN COMPLETING THIS FORM

ANY PERSON WHO IS AGGRIEVED BY THE REFUSAL OF THE COUNCIL TO GRANT A VEHICLE LICENCE OR TO THE PLACING ON SUCH A LICENCE OF ANY CONDITIONS MAY APPEAL TO THE COUNCIL'S LICENSING APPEALS BOARD AND / OR A MAGISTRATES COURT.

Signature of proposed Licence Holder..... Dated.....

NOTE: This form must be signed personally by a director where the proposed licence holder is a limited company, giving the name of the signatory in block letters

This Authority 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 or in receipt of public funds solely for these purposes.

WHEN COMPLETED THIS FORM MUST BE RETURNED TO:

THE LICENSING MANAGER
 LICENSING SECTION
 ANGEL COURT
 HIGH STREET
 COLCHESTER
 CO1 1FL

A member of the licensing staff will be pleased to assist you if you have any enquiry in regard to the completion of this form or about licensing in general please contact us on **01206 282702** between 9.00 am and 5.00 pm.

THE LICENSING OFFICE OPERATES A BOOKING SYSTEM, PLEASE TELEPHONE **01206 282702** TO ARRANGE A CONVENIENT APPOINTMENT

Should you wish to discuss in **confidence** anything in relation to your application, or licensing in general, you can speak to the licensing department on **01206 282702**.

Below is for official use only

		Initials
Amount of fee received:	£	
Date:		
Receipt number		

Documents received	Date seen	Initials
Registration document		
DVLA drivers licence		
MOT certificate		
Insurance document		
Vehicle inspection sheet		
Bill of sale		

NOTES

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Letter of release for
Change of Owner for Hackney Carriage

I(full name)

Of.....(address)

Have sold my business vehicle(make)

.....(model) (Registration number) and have no

more interest in the Hackney Carriage Licence(plate number)

New Owner:(full name)

.....(address)

.....

.....

Signed

Date

Previous Owner(s) (full name)

..... (address)

.....

.....

Signed

Date

