

PRIVATE HIRE OPERATOR

Local Government Miscellaneous Provisions Act 1976



COTSWOLD
DISTRICT COUNCIL

APPLICATION FOR A PRIVATE HIRE OPERATOR'S LICENCE

Please tick appropriate box

NEW **1 YEAR**
RENEWAL **5 YEARS**

APPLICANT DETAILS (INDIVIDUAL)			
Full Name			
Address			
Home Tel. No.		Mobile. No.	
Email Address			

DETAILS OF OPERATING BASE(S)	
Trading name	
Address(es)	
Telephone Number(s)	

OTHER DETAILS	
Number of licensed Private Hire Vehicles	

OPERATOR DETAILS			
1. Has any Private Hire Operator's Licence held by you been revoked or suspended or has any Licensing Authority refused to grant or renew a Licence?			YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES, state details:			
Licensing Authority		Date	
2. Have you, or any Company of which you are or have been a Director or Secretary, been convicted of an offence or are there any proceedings and enquiries pending?			YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES, please complete as appropriate :			
Date	Court	Offence	Sentence
3. Are you:			
(a) the sole proprietor? If YES, go to the DECLARATION section of this form			YES <input type="checkbox"/> NO <input type="checkbox"/>

(b) operating in partnership? If YES, complete Part A of the PARTNERSHIP/LIMITED COMPANY section at the end of this form.	YES <input type="checkbox"/> NO <input type="checkbox"/>
(c) operating the business as a Limited Company? If YES, complete Part B of the PARTNERSHIP/LIMITED COMPANY section at the end of this form.	YES <input type="checkbox"/> NO <input type="checkbox"/>

DECLARATION

CAUTION : YOU ARE WARNED THAT MAKING AN UNTRUE STATEMENT FOR THE PURPOSES OF OBTAINING A PRIVATE HIRE OPERATOR'S LICENCE IS AN OFFENCE.

I, the undersigned hereby apply for a Private Hire Operator's Licence to operate Private Hire Vehicles within the Cotswold District Council's area and declare that my answers to all the questions on this form and all particulars entered on the form are true and that I have not withheld any relevant information.

I also agree to be bound by the Council's Policy, legislation, guidance and byelaws

I agree that I have read and understood the Council's Hackney Carriage and Private Hire Policy (please tick box)

This application must be signed by the applicant personally or, in the case of a Company, by a Director or other duly authorised agent of the Company, or in the case of a partnership, each individual partner

Signed:

Dated:

Signed:

Dated:

NOTES

This application will not be considered unless accompanied by the following:-

- the fee
- **DBS Certificate (if applicable) (must be less than 1 month old at date of application)**

Your completed application form, fee and supporting documentation should be returned to:

Environmental and Regulatory Services
 Cotswold District Council
 Trinity Road
 Cirencester
 Gloucestershire
 GL7 1PX

The information on this form is required in order to process your application and will be kept in confidential files registered under the Data Protection Act subject to disclosure necessitated by:-

- any legal requirement;
- other bodies responsible for auditing or administering public funds in order to prevent and detect fraud under Section 6 of the Audit Commission Act 1998
- the requirements of the Local Government (Miscellaneous Provisions) Act 1976 and the Town Police Clauses Act 1847, in relation to Public Registers;
- any obligation by Court Order to disclose the information to third parties.

PARTNERSHIP/LIMITED COMPANY**A. PARTNERSHIP – complete information below for all partners – if more than one please photocopy this sheet.**

Partner	Name				
	Address				
	Has any Private Hire Operator's Licence held by this person been revoked or suspended or has any Licensing Authority refused to grant or renew a Licence? If YES state			YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Licensing Authority		Date		
	Has this person, or any Company of which he/she is/has been a Director or Secretary, been convicted of an offence? If YES state			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Date	Court	Offence	Sentence		

B. LIMITED COMPANY - complete information below for all Directors and Company Secretaries - if more than one please photocopy this sheet.

Name of Registered Company					
Address of Registered Company					
Director	Name				
	Address				
	Has any Private Hire Operator's Licence held by this person been revoked or suspended or has any Licensing Authority refused to grant or renew a Licence? If YES state			YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Licensing Authority		Date		
	Has this person, or any Company of which he/she is/has been a Director or Secretary, been convicted of an offence? If YES state			YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Date	Court	Offence	Sentence	
Company Secretary	Name				
	Address				
	Has any Private Hire Operator's Licence held by this person been revoked or suspended or has any Licensing Authority refused to grant or renew a Licence? If YES state			YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Licensing Authority		Date		
	Has this person, or any Company of which he/she is/has been a Director or Secretary, been convicted of an offence? If YES state			YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Date	Court	Offence	Sentence	