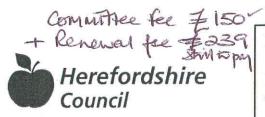
2 / MAY 2011

PLEASE TICK



Receipt No: 469 384 23 23 24 25 26 Income Code C05027 191130 9126 Date. 27 25 11

Application for grant/renewal of a

VEHICLE LICENCE OUTSIDE STANDARD LICENCE CONDITIONS

PLEASE TICK

PRIVATE HIRE VEHICLE			GRANT	
HACKNEY CARRIAGE VEHICLE			RENEWAL	
Reasons for application being outside conditions	LAT	E	RENEWAL	9.
Surname (MR.MRS.MISS). RICKETT	S	****	Maiden Nan	ne
All Forenames Ke 171-1	Pre	evio	us Surnames/Alias	ses
Date of Birth 07-04-1962-Place of Birth PEMB2:DGE Sex M/▶				
Present address 12 BARDOLPH			551	
			Post	Code HRZ FQA
Telephone Number: Business			. Home	
Mobile	******			
E-mail				
PREVIOUS ADDRESSES IN LAST 12 MONT	'HS IF A	APP	LICATION IS FOR	RRENEWAL
GIVE NAMES AND ADDRESSES OF ANY CHANGE OF EMPLOYER, DURING THE PAST 12				
MONTHS IF APPLICATION IS FOR RENEWAL				
N				••••••
Name and address of proprietor of the vehicle. KETH RICKETTS				
12 19 11-009 11 0000	H1./.Y.	 .		
(Where applicant is partnership, limited company or other incorporated body)				
Name of partnership, company or other incorp	orated t	nodi	y.	
Address of Registered Office				
Address from which business will be conducted.				
12 BARDOLPH CLOSÉ MOREFORD HRZZONA				

(To be completed in respect of each Director and/or Partner using a separate sheet as necessary)						
Surname	Forename(s)					
Address						
Date of Birth						
PARTICULARS OF VEHICLE						
1. NAME ON REGISTRATION DOCUMEN	T KETTH RICKETS					
2. MAKE PEUGEOT	8. REGISTRATION NO. SA OS KVK					
3. MODEL EXPERT E 7 TAXI	9.PLATE NO. OSO					
4. TYPE OF BODY MPV	10.ENGINE CAPACITY 1997					
5. COLOUR(S) WHITE	11. FUEL (PETROL/DIESEL/LPG) DIESEL					
6. NO. OF SEATS (EXC DRIVER)	12. CHASSIS/BODY NO. VF3XCR4K464136766					
7. DATE OF 1 ST REGISTRATION O1-10	0 08 13. ENGINE NO. DY WD4027159					
ANY ALTERATIONS TO VEHICLE IN PAST 12 MONTHS IF APPLICATION IS FOR RENEWAL YES/NO (if yes, please notify on a separate sheet)						
Is the Vehicle Wheelchair accessible? YES/NO						
Does the vehicle have a meter fitted? YES/NO Model:						
Address at which vehicle will be garaged 12. RANDOCPU CLOSE SOUTH DACE. HUNTORO URZAQA						
Insurance Company. 1. F. P. S.C.4EMES Insurance Valid From. 1.7/12/ 2010						
Persons covered to drive with limitations (if any) ie. Age restriction, insured only.						
,						
Hackney/Private Hire Cover						
Where is the Fire Extinguisher kept? UNGOL PASSANCOL SEAT						
Is the vehicle to be used to undertake Social Service/Education Dept Contract? YES/NO If YES, state type of contract						

NB Drivers on Social Services/Education Contract journeys must hold a County Transport Badge in addition to their Dual Driver Badge.

Contact - Children and Young People's Directorate, School Admissions and Transport Department Blackfriars PO Box 185 Blackfriars Street Hereford HR4 9ZR

Office Tel No: 01432 260928 Email: schooltransport@herefordshire.gov.uk

Has the applicant held Vehicle Licences granted by this or any other authority: YES/NO If YES, give details: (Continue on separate sheet if necessary).

		The second secon				
NAME OF AUTHORITY	REGISTRATION NO	PLATE NO				
Have any licences in respect of Private Hire or Hackney Carriage held by you ever been revoked, suspended or refused by any other authority?						
If YES, give details						
NAME, ADDRESS AND BADGE NO. of all persons who will be driving						
KEITY RICKETTS I'L BANDOLPH CEDE HÃO HAZZAA D 5875						
LEXLTY PRESSOR GICKLEY DAVE D6087 MICHELLE PRESSOR D6397						
Name and address of Company/Group for whom vehicle will operate						
HIGHTOWN TAXIS						
Signature of Operator						
I certify that the above answers are true and understand that if there are any omissions or false statements, my application will be refused or if a licence has been issued, it will be liable to immediate suspension or revocation.						
I understand that any licence issued to me is subject to the provisions of the Town Police Clauses Act 1847, the Local Government (miscellaneous Provisions) Act 1976 and any conditions and byelaws that may be in force from time to time within the Licensing Authority. I further understand that any vehicle licence plate issued to me will remain in the ownership of Herefordshire Council.						
I enclose the following:						
Certificate of Insu Registration Docu Certificate of Com		depot)				
	Certificate (issued by Council tes					
I certify that I have received, read and understood the conditions in relation to the issue of a hackney carriage/private hire vehicle licence and agree that information in relation to my application may be shared with other directorates within Herefordshire Council.						
Signature. // Attitle	Date 1.7- C	5-2011				

ON COMPLETION PLEASE SUBMIT THIS FORM, WITH THE REQUIRED FEE AND DOCUMENTATION TO ONE OF THE HEREFORDSHIRE COUNCIL CUSTOMER SERVICE CENTRES

Any queries regarding any aspect of this application please contact the Taxi Licensing Office.

Tel: 01432 260105

PARTNER

(THIS FORM TO BE COMPLETED BY THE SECOND LICENCE HOLDER, IF YOU INTEND TO HAVE TWO NAMES ON YOUR LICENCE)

VEHICLE LICENCE

Surname (MR.MRS.MISS.MS)	Maiden Name				
All Forenames	Previous Surnames/Aliases				
Date of BirthPla	ace of BirthSex M/F				
Present Address					
	Post Code				
Telephone Number: Business	Home				
Particulars of Vehicle					
REGISTRATION NO.	PLATE NO.				
I certify that the above answers are true and statements, my application will be refused of immediate suspension or revocation.	d understand that if there are any omissions or false or if a licence has been issued, it will be liable to				
I understand that any licence issued to me is subject to the provisions of the Town Police Clauses Act 1847, the Local Government (Miscellaneous Provisions) Act 1976 and any conditions and byelaws that may be in force from time to time within the Licensing Authority. I further understand that any vehicle licence plate issued to me will remain in the ownership of Herefordshire Council.					
I certify that I have received, read and understood the conditions in relation to the issue of a hackney carriage/private hire vehicle licence and agree that information in relation to my application may be shared with other directorates within Herefordshire Council.					
Signature Data Protection Act 1998	Date				
This policy covers the treatment of personal data that Herefordshire of complete and submit an online form on our web site.	Council may collect when you e-mail us, complete an application form, or when you				

Herefordshire Council is registered with the Data Protection Act 1998 for the purpose of processing personal data in the performance of its legitimate business. Any information held by the Council will be processed in compliance with the principles set out in the Act. Where necessary we may share this personal data with partner organisations for the protection of public funds administered which may include the prevention or detection of fraud and auditing purposes.

When completing forms you may be asked for personal information such as name, address, postcode etc. It is only when you supply this type of information

Further information relating to the Data Protection Act 1998 can be sent to you on request. If you have concerns about the processing of your personal data by the Council you may contact the Council's Data Protection Officer:

Data Protection Officer,, County Secretary and Solicitor, Herefordshire Council, Brockington, 35 Hafod Road, Hereford HR1 1SH

that you can be personally identified.

12 BARDOCPH CLOSE
HENETORD
HRZ FOR
17 MAY 2011

DEMP CLAINE

Sound For THE DOLLY IN GETTING BACK TO YOU, ADIE DID TOLL ME TO RENOW THE CICENCE BUT WITH ACL THE PROBLEMS WITH THE THEN 450 WHICH AME STILL NOT SOUTED I FORGOT I CAN ONLY APOLOGISE AND WILL SPORTE FUTYOR AT MEETING.

MANY TUMES
HND ONCE AGAIN
VORY SOMMY
L ELL
K. RICKETS

2 / MAY 2011

TAYI LICENSING UNIT

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