

ELI VL 15 (new vehicle licence)
Outside standard licence conditions



Receipt No:
..27022.6...

Income Code
N80009474

Date... 12/5/09

£150 for grant fee already paid

**Application for grant/renewal of
VEHICLE LICENCE OUTSIDE STANDARD LICENCE CONDITIONS**

PLEASE TICK		PLEASE TICK	
PRIVATE HIRE VEHICLE		GRANT	
HACKNEY CARRIAGE VEHICLE		RENEWAL	
HOW DOES THE APPLICATION DEVIATE FROM STANDARD CONDITIONS	<i>The plate had expired.</i>		

Surname (MR. MRS. MISS) *NICHOLAS* Maiden Name.....

All Forenames *James* Previous Surnames/Aliases *MADDY*

Date of Birth..... Place of Birth..... Sex M/F

Present address.....

.....Post Code.....

Telephone Number: Business *01432 266211* Home.....

Mobile *07997 1902982*

PREVIOUS ADDRESSES IN LAST 12 MONTHS IF APPLICATION IS FOR RENEWAL

GIVE NAMES AND ADDRESSES OF ANY CHANGE OF EMPLOYER, DURING THE PAST 12 MONTHS IF APPLICATION IS FOR RENEWAL

(Where applicant is partnership, limited company or other incorporated body)

Name of partnership, company or other incorporated body.

Address of Registered Office

Address from which business will be conducted.

(To be completed in respect of each Director and/or Partner using a separate sheet as necessary)

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Surname..... Forename(s).....

Address.....

Date of Birth..... Driver's Badge No.....

PARTICULARS OF VEHICLE

1. NAME ON REGISTRATION DOCUMENT

2. MAKE Skoda

8. REGISTRATION NO. GNS3 Hrg

3. MODEL Octavia Classic

9. PLATE NO. H332

4. TYPE OF BODY

10. ENGINE CAPACITY 1900

5. COLOUR(S)

11. FUEL (PETROL/DIESEL/LPG) Diesel

6. NO. OF SEATS (EXC DRIVER)

12. CHASSIS/BODY NO.

7. DATE OF 1ST REGISTRATION

13. ENGINE NO.

**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**

Make: Sheriff Model: Ultima

Address at which vehicle will be garaged 171 Widemare Street
Hereford

Insurance Company QEB

Insurance Valid From..... To.....

Persons covered to drive with limitations (if any) ie. Age restriction, insured only.

Hackney/Private Hire Cover.....

Where is the Fire Extinguisher kept? Boot

Is the vehicle to be used to undertake Social Service/Education Dept Contract? **YES/NO**

If YES, state type of contract WHD 75

Name and address of proprietor of the vehicle.....

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). West Midlands Traffic Division

Have any licences in respect of Private Hire or Hackney Carriage held by you ever been revoked, suspended or refused by any other authority? **YES/NO**

If YES, give details.....

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.....
NAME, ADDRESS AND BADGE NO. of all persons who will be driving

.....
.....
.....
Name and address of Company/Group for whom vehicle will operate.....

.....
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:

1. Certificate of Insurance
2. Registration Document
3. Certificate of Compliance (issued by Council testing depot)
4. Vehicle Inspection Certificate (issued by Council testing depot)

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.....  Date..... 15-3-09

ON COMPLETION PLEASE RETURN Any queries regarding any aspect of this application please contact the Taxi Licensing Office. Tel: 01432 260973 OR 260461	(Marked PRIVATE AND CONFIDENTIAL Hackney Carriage & Private Hire Licensing Herefordshire Council Council Offices P O Box 233 Bath Street Hereford HR1 2ZF
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PARTNER FORM

(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 Birth.....Place of Birth.....Sex 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 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 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.....Date.....

Data Protection Act 1998

This policy covers the treatment of personal data that Herefordshire Council may collect when you e-mail us, complete an application form, or when you complete and submit an online form on our web site.

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 that you can be personally identified.

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.

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