

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



Receipt No:
Income Code	N80009474
Date	14.8.09

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	condition 3.3.b		

Surname (MR.MRS.MISS) KAYE Maiden Name /

All Forenames BRIAN MALCOLM Previous Surnames/Aliases /

Date of Birth 20.1.51 Place of Birth HEREFORD Sex M

Present address No 1 BLACK HART COTTAGE

LITTLE BACH RD HEREFORD Post Code HR2 8BB

Telephone Number: Business Home

Mobile 07968147415

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.

AS ABOVE

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

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Surname KAYE Forename(s) BRIAN MALCOLM
Address No 1 BLACK HAAT COTTAGE LITTLE HIRCH
Date of Birth 20.1.51 Driver's Badge No 5738

PARTICULARS OF VEHICLE

- | | |
|---|--|
| 1. NAME ON REGISTRATION DOCUMENT | |
| 2. MAKE <u>FOCUS</u> | 8. REGISTRATION NO. <u>FES3 HAI</u> |
| 3. MODEL <u>MONDO</u> | 9. PLATE NO. <u>334</u> |
| 4. TYPE OF BODY <u>ESTATE</u> | 10. ENGINE CAPACITY <u>1995</u> |
| 5. COLOUR(S) <u>SILVER</u> | 11. FUEL (PETROL/DIESEL/LPG) <u>DIESEL</u> |
| 6. NO. OF SEATS (EXC DRIVER) <u>4</u> | 12. CHASSIS/BODY NO. |
| 7. DATE OF 1 ST 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) no

Is the Vehicle Wheelchair accessible? ~~YES~~/NO

Does the vehicle have a meter fitted? YES/~~NO~~

Make: SHEARF Model:

Address at which vehicle will be garaged No 1 BLACK HAAT COTTAGE
LITTLE HIRCH WA HEREFORD

Insurance Company SWINTON

Insurance Valid From To

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

INSURED ONLY

Hackney/Private Hire Cover HACKNEY

Where is the Fire Extinguisher kept? IN THE BOOT

Is the vehicle to be used to undertake Social Service/Education Dept Contract? YES/NO
If YES, state type of contract.....

Name and address of proprietor of the vehicle AS ABOVE

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).

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

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If YES, give details.....

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

BORNA WAYE No 1 BLACK HAAT COTTAGE
LITTLE DITCH No HEREFORD

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

Signature of Operator..... B m Wayer

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..... B m Wayer..... Date..... 14.8.09.....

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