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| New Uniform Ref: | | | |
| PHV NO: | | FEE: | |



Application for the Grant of a Private Hire Vehicle Licence

IMPORTANT: PLEASE READ THE GUIDANCE NOTES ATTACHED FIRST AND CHECK YOUR DETAILS BELOW. PLEASE AMEND WHERE NECESSARY.

PART ONE: INDIVIDUAL APPLICANT AND ADDRESS DETAILS *(if more than one applicant, please attach details of the other applicant(s))*

| | | | | | |
|---|--|-----------------------|------------|--|-----------|
| Title: | | First Name(s): | | | |
| Surname: (please include any previous surname(s) used) | | | | | |
| Address: | | | | | |
| Date of Birth: | | Email Address: | | | |
| Home Tel No: | | Mobile No: | | | |
| National Insurance Number: | | | | | |
| Do you have a right to live and work in the UK: | | | Yes | | No |

PART TWO: COMPANY DETAILS *(To be completed if applicant is a company not an individual)*

| | | | | | |
|-------------------------------------|--|-----------------------|--|--|--|
| Company Name: | | | | | |
| Company Registration Number: | | | | | |
| Director(s) Names: | | | | | |
| Secretary's Name: | | | | | |
| Registered Office Address: | | | | | |
| Contact Tel No: | | Email Address: | | | |



PART THREE: CONVICTIONS/PROSECUTIONS/CAUTIONS

Please declare all convictions including "spent" convictions.

Having read the guidance notes provided to you, are there any motoring (including fixed penalties and/or endorsements), criminal convictions or cautions recorded against you?

| | | | | |
|-----|--------------------------|----|--------------------------|--|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | (Tick appropriate box) - If yes, please provide the following information: |
|-----|--------------------------|----|--------------------------|--|

| Date of Conviction | Offence: | Sentence: |
|--------------------|----------|-----------|
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PART FOUR: PENDING PROSECUTIONS

Are there any pending motoring (including fixed penalties and/or endorsements) or criminal prosecutions against you?

| | | | | |
|-----|--------------------------|----|--------------------------|--|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | (Tick appropriate box) - If yes, please provide the following information: |
|-----|--------------------------|----|--------------------------|--|

| Date of next hearing: | Offence: |
|-----------------------|----------|
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PART FIVE: VEHICLE DETAILS

| | | | | | |
|--|----|---------------------------------------|---|-----|----|
| Registration No: | | Date of Registration: | | | |
| Make: | | Model: | | | |
| Body Type: | | Fuel Type: | | | |
| No. of Passengers: | | Colour: | | | |
| Chassis No: | | Engine No: | | | |
| Vehicle Mileage: | | Is the vehicle wheelchair accessible? | <table border="1"> <tr> <td>Yes</td> <td>No</td> </tr> </table> | Yes | No |
| Yes | No | | | | |
| If wheelchair accessible, is the vehicle side loading, rear loading or both? | | | | | |



PART SIX: INSURANCE DETAILS

Insurance Company Name:

Policy/Cover Note Number:

Insurance Expiry Date:

PART SEVEN: PLATE DISPENSATION - Do you wish to apply for an exemption from displaying the licence plate and/or livery on the vehicle? Please tick appropriate box.

Plate:

Yes

No

Livery:

Yes

No

Note: If you wish to apply, please attach the exemption application form.

PART EIGHT: OPERATOR DETAILS - This part to be completed by the operator only.

I wish to support the application for a Private Hire Vehicle Licence and have seen the information provided by the proprietor in this form.

Name of Private Hire Company:

Signature:

Date:

PART NINE: DECLARATION

I wish to apply for the grant of a Private Hire Vehicle Licence in Portsmouth. I confirm that I have read the Private Hire Vehicle Licence Guidance and understood the Council's policy guidelines. I have personally completed the details provided above. I have not made any false statements and know it is a serious offence to give false or misleading information in support of my application. By granting my licence I accept and understand the conditions of my licence and my general obligations to act in accordance with the provisions of the Local Government (Miscellaneous Provisions) Act 1976. I also understand that I may also be subject to general, targeted and test purchase inspections by authorised officers.

Signature of Applicant:

Date:

PART TEN: LICENSING SERVICE CONTACT DETAILS

Address:

Licensing Service,
Civic Offices,
Guildhall Square,
Portsmouth, Hants, PO1 2AL

Telephone:

023 9283 4073

Fax:

023 9283 4811

Email:

Licensing@portsmouthcc.gov.uk

Opening Hours:

Mon to Fri: 9 am until 4 pm

These hours may be extended until 5pm at busy periods



Portsmouth City Council will process your personal information in accordance with data protection law. The personal details provided by you will be used for licensing service purposes. Your details will be held on a database and where the law allows, may be shared with other departments within the council to update details they hold about you. The council may also be required to disclose personal information to third parties (such as Police, Department for Work and Pensions or for the National Fraud Initiative) for the purposes of preventing or detecting crime or apprehending or prosecuting offenders.

For further information about how the Council collects and uses personal information please visit our website: <https://www.portsmouth.gov.uk/ext/the-council/data-protection-privacy-notice>

| FOR OFFICE USE ONLY | | | | | |
|---------------------------------|---|-------|------------------------------|-------------|---|
| Application Details: | | | | | |
| Date Application Received: | | | Officer Initials: | | |
| Date Licence Issued: | | | Officer Initials: | | |
| Fee Details: | | | | | |
| Fee: | £ | Date: | | Receipt No: | / |
| Vehicle Details: | | | | | |
| Registration Doc (V5) seen: | | | Insurance verified: | | |
| CCTV verified: | | | Plate and Livery on vehicle: | | |
| Plate/Livery dispensation req?: | | | | | |

Officer Notes:

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