

### **DEPARTMENT OF PLACE**

# APPLICATION FOR A LICENCE TO ACT AS A HACKNEY CARRIAGE

DRIVER PART A: Section 51 of the Local Government (Miscellaneous Provisions) Act 1976

TO BE COMPLETED BY A SOLICITOR OR JUSTICE OF THE PEACE							
THIS is the document referred to in the DECLARATION of							
Hereto annexed	and <b>DECLARE</b> E	BEFORE ME this		.day of	20		
Signature:							
Status:							
Title of Employe	r (please include	official Stamp)					
Surname			First Name(s)				
Date of Birth: Previous/Other Names							
Current Address:	Current Address:						
Postcode:							
Email Address:Phone No							
Details of ALL CONVICTIONS FOR ANY OFFENCE WHETHER DRIVING OFFENCES (INCLUDING Fixed Penalty Notices) or any other offences MUST BE DECLARED. All Police Cautions MUST BE DECLARED.  The Rehabilitation of Offenders Act 1974 is not applicable							
Court	Date	Offence		Sentence			
N.B: Failure to disclose particulars of any PREVIOUS CONVICTIONS/CAUTIONS issued by Police or any other Enforcement agency may result in you being prosecuted and/or your application being refused							

#### **DATA PROTECTION ACT 1998:**

Bradford Council requires this information in order to process your application for a licence. Public safety must be protected and so the information you provide on this form may be used to prevent and detect crime. From time to time, as prescribed by law, this information may also be shared for the same purposes with other organisations, which handle public safety. False and/ or misleading information in this Declaration may render this application invalid and may also result in prosecution.

1.	Please state the length of licence you are applying for: 1 Year 3 Year							
2.	Do you currently hold a full UK DVLA driving licence? Yes No							
3.	How long have you held your current DVLA licence?							
4.	Please state your licence number:							
	Valid fromtoinclusive							
5.	Have you previously held or applied for a Hackney Carriage or Private Hire Driver's Licence with this Or any other Authority:  Yes No							
	If Yes, please give details:							
6.	Have you ever been charged or summoned to Appear before any Court  Yes No							
	If Yes, please give details:							
7.	Are you aware of any Police enquiries being Made at this present time involving yourself Yes No							
	If Yes, please give details:							
8.	Do you intend to work solely within the Bradford Distriict? Yes No							
	If No, please give details of other districts:							
To made and the being	Name)							

Hackney Carriage & Private Hire Service City of Bradford Metropolitan District Council Shearbridge Depot, Great Horton Road Bradford BD7 1PU Telephone: 01274 434316

#### **PART B**

The following Statutory Declaration should be completed in front of a Solicitor or Justice of the Peace once the application form has been completed in full.

It is an offence under the Perjury Act 1911 to swear a Statutory Declaration, which is false

## STATUTORY DECLARATION

(name of applicant).....

١,

Of	(address of applicant
do <b>SOL</b>	EMNLY AND SINCERELY DECLARE as follows:
Licence	atements, information and particulars contained in the document entitled "Application for a to Act as a Hackney Carriage Driver" duly completed and signed by me and now produced own to me and annexed hereto is true in all respects
	<b>MAKE</b> this <b>SOLEMN DECLARATION</b> conscientiously believing the same to be true and by f the Provisions of the Statutory Declarations Act 1835
DECLA	ARED at
This	
day of	
BEFOR	REME
Solicito	r/Justice of the Peace
(Please	e include your official stamp)
	pplication must be accompanied by one recent passport style photograph of the ant.The Solicitor/Justice of the Peace should also sign the back of the photograph and

#### **DATA PROTECTION ACT 1998:**

"This is a true likeness of (full name of applicant") and include date likeness was compared

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# FOR OFFICE USE ONLY

Reference:				Current HC:						
Coins	50p	£1	£2	£5	£10	£20	£50	Card	Cheque	Change
Amount Paid: Red			ceipt No: Date:							
Amount Paid: Red			ceipt No: Date:							
Amount Paid: Rec			eipt No:			Date:				