

APPLICATION FORM: HACKNEY CARRIAGE / PRIVATE HIRE VEHICLE LICENCE

Preamble: We may get information about you from certain third parties, or give information to them, to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, as permitted by law. These third parties include other Local Authorities and Government departments.

To: The Head of Regulatory Services and Community Safety, Oxford City Council, St Aldate's Chambers, 109 St Aldate's, Oxford, OX1 1DS

ALL QUESTIONS BELOW MUST BE ANSWERED AND NOT CROSSED OUT. PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

THIS APPLICATION FORM MUST BE COMPLETED BY THE LICENCE HOLDER(S) OF THE VEHICLE. IF THE VEHICLE LICENCE HAS MORE THAN ONE LICENSEE, PLEASE PROVIDE DETAILS OF ALL OTHER LICENCE HOLDERS.

FULL NAME:		
ADDRESS:	POST CODE:	
MOBILE TELEPHONE:	HOME TELEPHONE:	
EMAIL ADDRESS:		
DATE AND PLACE OF BIRTH:	NATIONALITY:	
HAVE YOU EVER BEEN OR CURRENTLY ARE A LICENSED DRIVER WITH OXFORD CITY COUNCIL OR ANY OTHER AUTHORITY? YES / NO (mark as applicable)		
PLEASE GIVE DETAILS OF ALL LICENCE(S) YOU HOLD/HELD - LICENCE NUMBER AND LICENSING AUTHORITY:		
I am applying to: GRANT / RENEW / CHANGE VEHICLE / TRANSFER OWNER / TEMPORARY VEHICLE (delete as applicable) a:		
HACKNEY CARRIAGE / PRIVATE HIRE (delete as applicable) VEHICLE		
VEHICLE MAKE:	MODEL:	COLOUR:
REGISTRATION NUMBER:	ENGINE CAPACITY (cc):	VEHICLE TAX BAND (A-M):
TYPE OF FUEL:	REGISTRATION DATE:	CO2 (G/KM):
HACKNEY CARRIAGE / PRIVATE HIRE PLATE NO.:		
PASSENGER SEATING CAPACITY:		
WHEELCHAIR ACCESSIBLE:	YES / NO (delete as applicable)	
AUDIO & VISUAL RECORDING EQUIPMENT FITTED:	YES / NO (delete as applicable)	
IS THE VEHICLE TO BE DRIVEN BY ANY OTHER LICENSED DRIVER(S)?:	YES / NO (delete as applicable)	
IF YOU HAVE ANSWERED "YES" ABOVE, PLEASE GIVE DETAILS OF THE DRIVERS FULL NAME & BADGE NUMBER: (If you need to amend your insurance certificate at any time, you must inform the Licensing Officer in writing and submit your Certificate of Insurance (not a photocopy) as proof – failure to do so is an offence)		
DETAILS OF THE PRIVATE HIRE OPERATOR FOR THIS VEHICLE:		

PLEASE PROVIDE DETAILS OF ANY OTHER LICENCE HOLDER(S) OF THIS VEHICLE, IF NOT JUST YOURSELF

NAME:	
ADDRESS:	POST CODE:
HOME TELEPHONE:	MOBILE TELEPHONE:
EMAIL ADDRESS:	SIGNATURE:

Please continue on a separate sheet if there is more than one Licence Holder of the vehicle.

I declare that I have read and understand the criteria and conditions of fitness for Hackney Carriage / Private Hire Vehicles in Oxford and the vehicle described above complies with those criteria and conditions. I am aware of and accept the duties and responsibilities in respect of the licensing and maintenance of the vehicle, the supervision of the driver, duty to provide information when required to do so and all other requirements under statute, byelaw and local regulations. I am aware that if any person knowingly or recklessly makes a false statement or omits any material particular in giving information on this form that person shall be guilty of an offence. I declare that I have checked the details given on this application form and to the best of my knowledge and belief they are correct. I am entitled to the licence for which I apply. Providing my contact details as above I give my authorisation for the Licensing Authority to contact me via telephone, email or text message.

DATE:..... SIGNATURE(S):.....

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. In addition we are also obliged to share vehicle data, including vehicle registration number, under The Air Quality (Taxi and Private Hire Vehicles database) Regulations 2019. For further information, see http://www.oxford.gov.uk/info/20141/data_protection/560/privacy_notice

FOR OFFICE USE ONLY: PARIS CODE: COST CENTRE: ED24 HCV: K9590 PHV: K9592

APPLICATION FORM: HACKNEY CARRIAGE VEHICLE

REQUEST TO DISPLAY ADVERTISEMENTS (INTERNAL / EXTERNAL)

To: The Head of Regulatory Services and Community Safety, Oxford City Council, St Aldate's Chambers, 109 St Aldate's, Oxford, OX1 1DS

ALL QUESTIONS BELOW MUST BE ANSWERED AND NOT CROSSED OUT. PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

THIS APPLICATION FORM MUST BE COMPLETED BY THE PROPRIETOR(S) OF THE VEHICLE:

ALL ADVERTISEMENTS MUST ADHERE TO THE CONDITIONS APPLICABLE TO THE LICENSING OF HACKNEY CARRIAGE VEHICLES (Please refer to the Hackney Carriage & Private Hire Licensing Application Pack for information relating to the relevant conditions). **A COPY OF THE ADVERTISEMENT DESINGS MUST ACCOMPANY THIS APPLICATION.**

NAME OF PROPRIETOR:	
ADDRESS OF PROPRIETOR:	
HOME TELEPHONE:	MOBILE TELEPHONE:
EMAIL ADDRESS:	
LICENCE NUMBER OF HACKNEY CARRIAGE VEHICLE:	
DATE VEHICLE LICENCE IS DUE TO EXPIRE:	
REGISTRATION NUMBER OF HACKNEY CARRIAGE VEHICLE:	
MAKE & MODEL OF HACKNEY CARRIAGE VEHICLE:	
NAME OF ADVERTISING AGENCY:	
ADDRESS OF AGENCY:	
DETAILS OF PRODUCT TO BE ADVERTISED:	
PROPOSED POSITION OF ADVERTISEMENT:	

I declare that I have read and understand the criteria and conditions applicable to the licensing of Hackney Carriage vehicles in Oxford and the advertisement described above complies with those criteria and conditions. I am aware that the request to provide advertisements either internally or externally must be applied for annually at the time of renewing the Hackney Carriage vehicle licence, or upon the request to transfer the ownership of the Hackney Carriage vehicle, or upon the request to change the currently licensed Hackney Carriage vehicle to another vehicle intended to be licensed as a Hackney Carriage vehicle. I am aware that if any person knowingly or recklessly makes a false statement or omits any material particular in giving information on this form that person shall be guilty of an offence. I declare that I have checked the details given on this application form and to the best of my knowledge and belief they are correct. I am entitled to the grant of permission for which I apply.

DATE:..... SIGNATURE:.....

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