**Form A**

|  |  |
| --- | --- |
| Lalpac No. |  |
| Fee Paid |  |
| Receipt No |  |
| FUND 31 HA |  |
| Licence Issued |  |

**CITY OF CARLISLE**

# HACKNEY CARRIAGE

# DRIVERS LICENCE APPLICATION

|  |  |
| --- | --- |
| **Before completing this form you should read the notes and forms (A to H) attached.**  **Please complete in black ink** | DVLA DRIVING LICENCE REC’D  IDS DRIVING LICENCE MANDATE  DISCLOSURE & BARRING SERVICE  MEDICAL EXAMINATION  DSA TEST CERTIFICATE  DSA WHEELCHAIR TEST  LOCAL KNOWLEDGE TEST  DISABILITY AWARENESS    **FILE No** |

|  |  |
| --- | --- |
| 1. Full Names of Applicant |  |
| 2. Home Address of Applicant (including postcode) |  |
| 1. Tel No.   Mobile No.  email address |  |
| 4. Date of Birth |  |
| 5. Is this application for a renewal of an existing licence? If so, give number | HD  \* **Wheelchair/Non Wheelchair**  \* Delete as applicable |
| 6. (a) Have you previously held a Hackney Carriage or Private Hire Drivers Licence?  (b) If 'Yes', has it ever been suspended or revoked? If so, give details  (c) If 'No', have you ever been refused such a licence, and, if so by whom? | (a)  (b)  (c) |

**Form A**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 7. Nam of Radio Circuit/Operator for whom applicant will drive |  | | | | | | | | |
| 8. Please state how many years of driving experience you have |  | | | | | | | | |
| 9. Do you have the right to work in the United Kingdom? |  | | | | | | | | |
| 10. What is you National Insurance Number? |  |  |  |  |  |  |  |  |  |
| 11. Any other relevant information |  | | | | | | | | |

I hereby apply for the grant/renewal of a Hackney Carriage Drivers Licence. I understand it is an offence to knowingly or recklessly make a false statement or omit any material particulars in giving the above information.

I enclose:

(1) My current **paper** driving licence (including photocard if issued)

(2) The fee payable, amounting to £

1. One passport size photograph
2. Disclosure Barring Service application **(new applicants & every three years only)**
3. DSA “Taxi Test” Pass Certificate **(new applicants only)**
4. DSA Wheelchair Pass Certificate (if required) **(new applicants only)**
5. IDS DVLA Licence Mandate **(new applicants & every three years only)**
6. Statutory Declaration signed by me in the presence of a Solicitor/Commissioner for Oaths (Form C)

(9) Consent to Disclosure signed by me (Form D)

(10) Medical Certificate (Form E or F as appropriate)

Date: …………………………………Signature:……………………………………………

**NOTES**

1. Remittances by cheque should be made payable to the “City of Carlisle".

2. The completed form should be returned to The Licensing Manager, Governance Directorate, Carlisle City Council, Civic Centre, Carlisle, CA3 8QG

In the event that this application is refused or not proceeded with, the licence fee will be retained to cover administrative costs.

**Form B**

**REQUEST FOR A DISCLOSURE & BARRING SERVICE (DBS) CHECK**

**IN RESPECT OF AN APPLICATION FOR THE GRANT OF A LICENCE**

**TO DRIVE A HACKNEY CARRIAGE OR PRIVATE HIRE VEHICLE**

## What is the Disclosure & Barring Service (DBS)?

The Disclosure & Barring Service is an executive non-departmental public body sponsored by the Home Office to help organisations make safer recruitment decisions. By providing wider access to criminal record information, the DBS will help employers in the public, private and voluntary sectors identify candidates who may be unsuitable for certain work, especially where it involves contact with children or other vulnerable members of society.

The DBS will help protect the public through a service called Disclosure. For more information on this new service visit the Disclosure & Barring Service Website ([www.gov.uk](http://www.gov.uk)) or telephone the DBS Information Line on 0870 90 90 811.

*How does this concern me as a prospective Hackney Carriage/Private Hire driver?*

The onus falls upon the applicant to complete a DBS application form that will be provided by the council with your application documents.

*Then what do I do?*

You must complete the form and return it to the Civic Centre for the Licensing Officer (Registered by the DBS) to countersign the application. He will also need to see several original documents to confirm your identity. The documents are listed on the DBS application form and may include your passport, driving licence, birth certificate, marriage certificate, utility bill etc. He will then send the completed form, along with the appropriate fee to the DBS. The fee may be paid by cheque (payable to City of Carlisle), cash or Debit Card

*How long will the disclosure take?*

You can expect to receive your disclosure within about four weeks of the DBS receiving your application. the Council do not receive a copy of this disclosure; therefore you should bring it to the Civic Centre for a Licensing Officer to verify the information.

*When will I get my Hackney Carriage/Private Hire driving licence?*

The disclosure check is only one of a number of formalities that you must go through to obtain your licence. Once you have completed the DBS check, DSA driving test, Medical, Local Knowledge test, DVLA driving mandate check and Disability Awareness Session, a Licensing Officer will be able to advise you further regarding these stages.

*Will I need to complete another DBS form in the future?*

Yes, every three years you must update your disclosure. The Licensing Office will send you an application form a couple of months before it is due. If you have a County Council Contract and you require a disclosure for this, we have a reciprocal arrangement whereby a disclosure obtained from one authority will be valid for the other for a period of 3 months. You must produce the form to both authorities.**Form C**

**STATUTORY DECLARATION**

I …………………………………………………… of ………………………………………….

Date of Birth …………………………………………………..

DO SOLEMNLY DECLARE as follows:

1. For at least twelve months prior to the date hereof I have held a licence (not being a provisional licence) under Part III of the Road Traffic Act 1972 authorising me to drive a motor car.

2. \* I have never been convicted of any offence

OR

3. \* I have been convicted of an offence or offences and I list below every offence which I have been convicted of including the date of the offence, the date of conviction, the court at which convicted and the sentence imposed by the court. This list includes any penalty imposed upon me other than by a Court but as a result of any legal process.

\* DELETE AS APPLICABLE

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of offence | Date of conviction | Offence | Court at which convicted | Sentence or Order of the Court or Fixed Penalty Notice |
|  |  |  |  |  |

I have not been convicted of any other offence except as set out above and I make this solemn declaration conscientiously believing the same along with the answers given in the attached application form to be true and by virtue of the provisions of the Statutory Declarations Act, 1835, and Section 5 of the Perjury Act, 1911.

Declared at ……………………………………………….

This …………… day …………………………………….. Signature of applicant

In the County of ………………………………………..

Before me …………………………………………………

Solicitor/Commissioner for Oaths

Office Address …………………………………………………………………………………………………..

APPLICANTS ARE REMINDED THAT AS FAILURE TO COMPLETE THIS DECLARATION CORRECTLY COULD GIVE RISE TO CRIMINAL PROCEEDINGS, IT IS IMPORTANT THAT THE SOLICITOR INVOLVED IS GIVEN ALL THE RELEVANT FACTS.

THE DECLARATION ABOVE RELATES TO **ALL OFFENCES** INCLUDING ANY MOTORING OFFENCES AND MUST INCLUDE ALL CONVICTIONS EVEN THOUGH THEY MAY HAVE BEEN DISCLOSED ON PREVIOUS APPLICATIONS. BY VIRTUE OF THE REHABILITATION OF OFFENDERS ACT 1974 EXCEPTIONS ORDER 1975 AS AMENDED,(Hackney/Private Hire Drivers being a listed occupation)

**ALL SPENT CONVICTONS MUST BE DISCLOSED**

**Form D**

CITY OF CARLISLE

DATA PROTECTION ACT 1998

**CONSENT TO DISCLOSURE**

Name ……………………………………………………………………………………

of ..………………………………………………………………………………………

Date of Birth …………………………………………

I the undersigned, consent to the processing of my personal data by Carlisle City Council (whether held on computer or on file) including:

* My personal details (Form A)
* My Statutory Declaration Form (Form C)
* The result of my Disclosure Barring Service check
* The result of my DVLA driving licence verification check
* My Medical Certificate (Form E) or my Self-Certificated Medical Questionnaire (Form F)

I consent to any or all of the information contained in Form A, C, E and F or information obtained as a result of the Disclosure & Barring Service check being disclosed at any hearing, whether in public or in private, of the Carlisle City Council Regulatory Panel (the RP) or any hearing held in any Court or Tribunal in relation to my application for a licence or any licence granted to me by Carlisle City Council. I understand that all the information contained in the above forms will be processed, disclosed and published for any or all of the following purposes:

(a) determining my licensing application

(b) monitoring and enforcing the licence conditions and bye-laws

(c) in the event that a breach of the licence occurs, to assist the RP to determine what action will be taken

1. assisting a Court or Tribunal in reaching a decision about a case before it

This council is under a duty to protect public funds and to promote social wellbeing. To this end, we may share the personal information you have provided with other departments of this council and with auditors, other councils and partner agencies in order to improve delivery of services, protect the public, prevent and detect fraud and reduce crime and disorder. We will not supply other authorities with your information unless we are satisfied that equal measures are in place to protect the information from unauthorised access. The council will also not supply your information to any organisation for marketing purposes without your prior consent. For further information please phone the Council Corporate Information Officer on 01228 817165.

Signature ……………………………………………………………………………….

Date ……………………………………………………………………………………..

**Form E**

CITY OF CARLISLE

##### HACKNEY CARRIAGE/PRIVATE HIRE VEHICLE DRIVERS

#### MEDICAL EXAMINATION

Notes: You should complete Part A without signing the form at this stage. You should arrange for a medical examination to be carried out by **your own Medical Practitioner** **who should complete Part B below.** Any consequential fee for this service is payable direct by the applicant to the Medical Practitioner. This completed form must be returned to the Council along with your application for your driver’s licence. Please note that a medical report must be submitted every three years. In the two years in between, only the self-certificated form at Form G need be completed.

**Once you reach the age of 65 years a full medical is required annually.**

### Part A

Name of Applicant (Block Capitals)

Address & Postcode

Date of Birth

Signature of Applicant

(sign in the presence of the Medical

Practitioner signing this certificate)

### Part B

I certify that I am a Doctor within the applicant’s medical practice and that I have this day examined the applicant. He has signed this form in my presence and in my opinion is **fit to drive a Hackney Carriage/Private Hire vehicle**. I have come to this decision having studied his medical records and using Group 2 standards for vocational drivers as laid down in the current issue of “At a glance guide to the current medical standards of fitness to drive” issued by the Drivers Medical Unit, DVLA, Swansea.

Signature of Medical Practitioner:

Name:

Date:

Surgery Address or stamp**Form F**

**THIS FORM TO BE COMPLETED UPON RENEWAL ONLY WHERE THE THREE YEARLY MEDICAL EXAMINATION IS NOT REQUIRED**

SELF-CERTIFICATED MEDICAL QUESTIONNAIRE

FULL NAME: …………………..………………………………………………………………………

ADDRESS: …………………….………………………………………………………………………

DATE OF BIRTH: ………………………

# Questions

|  |  |  |
| --- | --- | --- |
| (1) | Have you, to the best of your knowledge, had an epileptic attack in the last 10 years? | YES/NO |
|  |  |  |
| (2) | Are you, to the best of your judgement, subject to:  (a) Vertigo or sudden attacks of disabling giddiness or  fainting: | YES/NO |
|  |  |  |
|  | (b) Any mental ailment likely to interfere with the  efficient discharge of your duties as a driver? | YES/NO |
|  |  |  |
| (3) | Have you any deformity or loss of members or physical disability likely to interfere with your duties as a driver of a Hackney Carriage? | YES/NO |
|  |  |  |
| (4) | Do you suffer from, or have ever suffered from any heart or lung disorder? | YES/NO |
|  |  |  |
| (5) | Do you suffer from any serious defect of hearing? | YES/NO |
|  |  |  |
| (6) | Do you suffer from any form of diabetes that is being treated with either insulin or tablets? | YES/NO |
|  |  |  |
| (7) | Are you now, or have you ever been, addicted to excessive consumption of alcohol or drugs? | YES/NO |
|  |  |  |
| (8) | Do you suffer from any deficiency in eyesight that may cause the driving by you or a Hackney Carriage to be a source of danger to the public? | YES/NO |
|  |  |  |
| (9) | Give details of any other disease or physical disability likely to interfere with the efficient discharge of your duties as a driver, or to cause the driving by you of a Hackney Carriage to be source of danger to the public. |  |

If you have answered yes to any of the above please give brief details below

........................................................................................................................................

........................................................................................................................................

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, THE ABOVE ANSWERS ARE TRUE AND I AGREE THAT IF IT IS CONSIDERED NECESSARY MY FAMILY DOCTOR OR OTHER MEDICAL ADVISER MAY BE CONTACTED ABOUT MY HEALTH.

SIGNED ……………………………………..………. DATE ……………………..…………………..

Name and Address of Doctor …………………………..………………………………………….

…………………………..………………………..…………………………………………………………..

**Form G**

CITY OF CARLISLE

HACKNEY CARRIAGE AND PRIVATE HIRE VEHICLE

DRIVER'S LICENCES

**CONDITIONS OF APPLICATION**

Before the Council grant a driver's licence to any driver of a hackney carriage or private hire vehicle the applicant for the licence must comply with the following:

1. Complete and submit to the Council an application on the forms prescribed by the Council.

2. Pay to the Council such fee as may be demanded by the Council for the issue of the licence.

3. Satisfy the Council that he is a fit and proper person to hold a driver's licence. In this connection the applicant will be required to undergo a Driving Standards Agency “Taxi” test, take a verbal local knowledge test and Disability Awareness Assessment. The relevant pass mark must be achieved. In addition a Disclosure & Barring Service check is also required.

4. Be a person who has for twelve months immediately prior to the date of the application been the holder of a licence (not being a provisional licence) granted under Part III of the Road Traffic Act 1972 authorising him to drive a motor car.

5. The Council will require the applicant to undertake a medical examination by the applicant’s **own** registered medical practitioner as to his fitness to be a driver of a hackney carriage or private hire vehicle. This examination is required every three years until aged 65 years, then annually thereafter. In the intervening years the self-certificated medical questionnaire should be completed. The medical practitioner will carry out the examination having regard to the guidelines for Group Two vocational drivers as recommended by the DVLA document “At a Glance Guide to the Current Medical Standards of Fitness to Drive”

6. Whether or not such a certificate has been produced, the Council may require the applicant to undergo a medical examination by a registered medical practitioner selected by the Council as to his physical fitness to be the driver of a hackney carriage or private hire vehicle. Any consequential fee for this service is payable direct by the applicant to the Medical Practitioner

7. Produce for examination a current driving licence issued to the applicant under the Road Traffic Acts 1960 to 1972 and sign a DVLA verification mandate to allow a driving licence check to be carried out.

8. Agree to comply with all conditions and/or codes or practice that are attached to the granting of a hackney carriage or private hire vehicle driver's licence.

9. Provide such other information as may be required by the Council.

If during the currency of any licence granted as a result of the application, any change takes place in the particulars supplied, the applicant shall forthwith notify the Council in writing of the change.

**Form H**

**NOTES FOR GUIDANCE TO APPLICANTS FOR**

**HACKNEY CARRIAGE DRIVER LICENCE**

In order that the Council of the City of Carlisle (the Council) may consider your application, the Council requires you to provide:

1. Completed Application Form (Form A)
2. Your Current Driving Licence (including photocard if issued)

(3) The Fee payable

1. One passport size photograph
2. Disclosure Barring Service check (Refer to Form B for guidance – new applicants only)
3. DVLA driving licence verification mandate (new applicants and every 3 years)

(6) DSA "Taxi Test" Pass Certificate (new applicants only)

(7) The sworn Statutory Declaration (Form C)

(8) Consent to Disclosure (Form D)

(9) Medical Certificate (Form E or Form F)

Why does the Council need Information?

The Council needs the above information in order to establish whether you are a fit and proper person to hold a Hackney Carriage Drivers Licence or a Private Hire Vehicle Drivers Licence as required by law. The information will be processed and disclosed for any or all of the following purposes.

(a) determining your licensing application

(b) monitoring and enforcing the licence conditions;

1. in the event that a breach of the licence occurs, to assist the Council's Regulatory Panel to determine what action will be taken.
2. (as in Form D)

Disclosure of Convictions

When submitting a new application for a licence to drive a hackney carriage or private hire vehicle you are required by the Council to declare any convictions or cautions you may have, **including** those regarded as "spent" under the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 2002. The information you give will only be taken into account in relation to your application (Refer to Form C).

You should be aware that the Licensing Authority is empowered in law to check with the Disclosure & Barring Service for the existence and content of any criminal record held in the name of an applicant (Refer to Form B).

The disclosure of a criminal record or other information will not necessarily debar you from gaining a licence unless the Authority considers that the conviction renders you not a fit and proper person. In making this decision the Authority will consider the nature of the offence, how long ago and what age you were when it was committed and any other factors which may be relevant. Any applicant refused a driver's licence on the ground that he/she is not a fit and proper person to hold such a licence has a right of appeal to a Magistrates' Court.

If you would like to discuss what effect a conviction might have on your application you may telephone the Licensing Office on 01228 817523 in confidence, for guidance.