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

**CITY OF CARLISLE**

# PRIVATE HIRE

# 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 STATUS/ENDORSEMENT CHECK 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 | PD\* **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. Driving Licence number: Date of Licence Expiry: |  |
| 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 your National Insurance Number? |  |  |  |  |  |  |  |  |  |
| 11. Name of Operator or Radio Circuit for whom applicant will drive |  |

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) The fee payable, amounting to £

1. One passport size photograph
2. Disclosure Barring Service application **(new applicants & every three years)**
3. DSA “Taxi Test” Pass Certificate **(new applicants only)**
4. DSA Wheelchair Pass Certificate (if required) **(new applicants only)**
5. Declaration of Previous Convictions(Form C)

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

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

(9) My GB driving licence (photocard – or old style paper licence issued prior 1998)

(10) I also give Carlisle City Council consent to view my driving licence information

 through the Government digital enquiry service (Gov.uk)

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 C (new applicant)**

**Declaration of Previous Convictions etc.**

In order to properly assess your suitability to be a licensed driver you are required to disclose any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever been convicted of a road traffic offence, or does your DVLA licence have any endorsements? | Yes |  | No |  |

If you have answered yes, please give details below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you been convicted, received a caution or fixed penalty notice for any offence other than motoring offences? | Yes |  | No |  |

If you have answered yes, please give details below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have any driving and/or criminal prosecutions pending against you? | Yes |  | No |  |

If you have answered yes, please give details below including the hearing date:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever had a Hackney Carriage/Private Hire Drivers Licence refused/revoked/suspended by Carlisle City Council or any other Local Authority? | Yes |  | No |  |

If you have answered yes, please give dates and brief details:

***Use continuation sheet over if required***

**Please note: we will be checking all available records failure to state all convictions/cautions/warnings/penalty notices may result in you having to attend a Regulatory Panel Hearing.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Date** |  |
| **Signature** |  |

**Form C (continuation Sheet)**

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|  |
| **Signature** |  |
| **Date** |  |

**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 Declaration of Convictions Form (Form C)
* The result of my Disclosure Barring Service check
* The result of my DVLA driving licence verification check through Gov.uk
* 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 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 practices 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**

**PRIVATE HIRE 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 & consent to view your driving licence information (Form A)

(3) The Fee payable

1. One passport size photograph
2. Disclosure Barring Service check (Refer to Form B for guidance – new applicants only)

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

(7) Declaration of Convictions (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.