

Licensing Partnership



OFFICE USE ONLY	
Amount paid	
Receipt number	
Date	

APPLICATION FOR A HACKNEY CARRIAGE / PRIVATE HIRE / DUAL DRIVER LICENCE

**PLEASE READ THE QUESTIONS CAREFULLY BEFORE COMPLETING THE FORM.
PLEASE USE BLOCK CAPITALS**

Local Authorities must protect funds it handles and so the information you have provided on this form may be used to detect and prevent fraud. The information may also be shared for the same purposes, with other organisations which handle public funds including the Audit Commission to be used as part of the National Fraud Initiative. Your personal data will also be shared with the local authorities, which make up the Licensing Partnership, for the purpose of processing your licensing application. Your personal data will not be used for any other purpose without your prior consent, except as permitted under the Data Protection Act 1988.

Please state which Licensing Authority you are applying to operate within (please note one application form per authority):

Maidstone Borough Council		Sevenoaks District Council		Tunbridge Wells Borough Council	
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Please state which type of licence you are applying for (note that only one application per vehicle may be made per form)

Hackney Carriage		Private Hire		Dual	
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New application	
Renewal application	

PART 1	GENERAL (Sole or Principal Applicant to complete in all cases)		
Surname		Forename (s)	
Any previous or other name			
Current home address: _____ _____ _____ Post code: _____			
<i>All previous addresses and dates of occupancy must be provided if you have lived under 5 years at you current address.</i>			
Home telephone number:	Email address:		
Mobile telephone number:	Fax number:		

PART 2	DRIVER DETAILS (Applicant to complete this part if he/she wishes to drive a vehicle licensed by one of the authorities of the Licensing Partnership)		
National Insurance number		Date of birth *	* Note: applicants must be at least 23 years of age for TWBC drivers
Type of Driving Licence held Full <input type="checkbox"/> UK <input type="checkbox"/> Other <input type="checkbox"/> This licence has been held continuously since (enter date): _____ If 'other' what type of licence? UK driving licence number: _____ Date of issue: _____ Expiry date of licence: _____			
Have you ever been convicted during the past three years of any motoring offence? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Are you disqualified by an Court from holding or obtaining a driving licence? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If you have seven or more penalty points on your driving licence your application may be refused; it will depend upon the nature of the offences.</i>			
Have you ever held a Hackney Carriage or Private Hire Driver's licence Yes <input type="checkbox"/> No <input type="checkbox"/>			
If "yes" which Authority was it with? _____ Badge number: _____			
If "yes" indicate which of the following is applicable: Current <input type="checkbox"/> Revoked <input type="checkbox"/> Suspended <input type="checkbox"/> Expired <input type="checkbox"/> Surrendered <input type="checkbox"/> In any instance of a licence being held which type Hackney Carriage <input type="checkbox"/> Private Hire <input type="checkbox"/> Dual <input type="checkbox"/>			
Name of company you will be driving for: (if you will not be driving for a company please state 'independent')			

PART 3	PREVIOUS CONVICTIONS (If any)
State below details of your conviction/cautions (if any) for any offence (including pending Court appearances), whether driving or other offences. If there are none state 'NONE'. Please note that taxi drivers are not subject to the Rehabilitation of Offenders Act 1974 and you should give details of all convictions, including spent convictions and cautions as well as any pending matters. If you would like to discuss what effect a conviction might have on your application you may telephone the Licensing Officer, in confidence, for advice on: Maidstone – 01622 602255 Sevenoaks – 01732 227004 Tunbridge Wells – 01892 554034	

Date of conviction/caution	Offence	Court	Sentence or Order

PART 4	GENERAL DECLARATION
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IMPORTANT I declare that all the answers given above are true. I understand that it is an offence under Section 57(3) of the Local Government (Miscellaneous Provisions) Act 1976 for any person to knowingly or recklessly make a false statement or omit any material particular in giving the required information.

Applicants signature:		Date:	
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Please enclose/produce the following documents with your application	OFFICE USE ONLY
UK Driving Licence (if you have a photo card licence you must produce both parts)	<input type="checkbox"/>
Criminal Bureau Records (CRB) completed check form	<input type="checkbox"/>
Licence fee	<input type="checkbox"/>
Items/documents to be considered as part of the application	
Medical Certificate	<input type="checkbox"/>
Driving Standards Agency test (DSA test) – new applicants only	<input type="checkbox"/> Date passed:_____
Topography / Knowledge test – new applicants only	<input type="checkbox"/> Date passed:_____
	Routes score:_____
	Streets score:_____
For Tunbridge Wells applicants – new applicants only	Seminar arranged on:_____
	Seminar attended yes <input type="checkbox"/> no <input type="checkbox"/>

Please telephone 01732 227004 for the up to date fee for the relevant Licensing Authority or go to the website for the relevant Licensing Authority.

Please return the completed form and fee at least ten working days before the renewal date, to:

**The Licensing Partnership,
 P.O. Box 182,
 Sevenoaks, Kent,
 TN13 1GP
 (cheques must be made payable to 'Sevenoaks District Council')**

You may have copies taken of you documentation at:

Maidstone Gateway between the hours of 10:00 – 13:00 hours Monday to Thursday.
Tunbridge Wells Gateway between the hours of 08:30 – 12:30 hours Monday to Friday.
Sevenoaks reception, Argyle Road between the hours of 08:45 – 17:00 hours Monday to Thursday and 08:45 – 16:45 hours on Friday.

Note

New applicants: All new applicants will need to arrange an interview with the relevant Licensing Officer for the authority in which they wish to drive. Please see the telephone numbers above.

Renewals: **If, for whatever reason, there is a delay in submitting your application form in good time we may not be able to process your application in time for its renewal. We would recommend that you submit the application at the earliest opportunity.**

EQUAL OPPORTUNITIES MONITORING

We are asking you to complete this section as part of our equal opportunities monitoring. We wish to ensure we are treating all sections of the population equally, to which of these groups do you consider you belong to (PLEASE TICK ONE BOX)

<p style="text-align: center;">WHITE</p> <p>British <input type="checkbox"/></p> <p>Irish <input type="checkbox"/></p> <p>Any other white background <input type="checkbox"/></p> <p>(PLEASE WRITE IN)</p>	<p style="text-align: center;">BLACK OR BLACK BRITISH</p> <p>Caribbean <input type="checkbox"/></p> <p>African <input type="checkbox"/></p> <p>Any other black background <input type="checkbox"/></p> <p>(PLEASE WRITE IN)</p>
<p style="text-align: center;">MIXED</p> <p>White & Black Caribbean <input type="checkbox"/></p> <p>White & Black African <input type="checkbox"/></p> <p>White & Asian <input type="checkbox"/></p> <p>Any other mixed background <input type="checkbox"/></p> <p>(PLEASE WRITE IN).....</p>	<p style="text-align: center;">ASIAN OR ASIAN BRITISH</p> <p>Indian <input type="checkbox"/></p> <p>Pakistani <input type="checkbox"/></p> <p>Bangladeshi <input type="checkbox"/></p> <p>Any other Asian background <input type="checkbox"/></p> <p>(PLEASE WRITE IN).....</p>
<p>Chinese <input type="checkbox"/></p>	<p>Other ethnic group <input type="checkbox"/></p> <p>(PLEASE WRITE IN).....</p>
<p>Unwilling to respond <input type="checkbox"/></p>	<p>GRANTED/REFUSED</p>
<p>Do you consider yourself disabled YES <input type="checkbox"/> NO <input type="checkbox"/></p>	