

# Hackney carriage and private hire drivers licence application

Local Government (Miscellaneous Provisions Act) 1976

Town Police Clauses Act 1847

**Please note:**

* Please complete this form in conjunction with the guidance notes and policy at [West Suffolk Council – Taxi and private hire licences](https://www.westsuffolk.gov.uk/business/licensing-and-regulation/taxi-private-hire-licensing/)
* All sections must be completed and all supporting documents must be supplied
* Re-licence applications must be submitted at least 28 days before licence expiry

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| **Fees**   * Fees must be paid at time of application and proof of payment must be supplied * Incomplete applications will be rejected and the fee will be refunded, which can take up to 5 working days. * Section 19 must be completed |

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| Application type (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First grant | | | | | | | | | | | | | | | | | | | | | Re-licence | | | | | | | | | | | | | | | |
| Duration of licence applied for (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One year | | | | | | | | | | | | | | | | | | | | | Three years | | | | | | | | | | | | | | | |
| Licence details (for re-licence applications only) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Licence number | | | | | | | CD | | | | | | | | | | | | | | Date of expiry | | | | | | | | | |  | | | | | |
| Applicant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title | | Mr | | | | | | Mrs | | | | | | Miss | | | | Ms | | | | | Other (please state) | | | | | | | | | | | | | |
| Forenames | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| National Insurance number | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Permanent address  (This will be used for all correspondence) | | | | | | | | | | | | Address:  Postcode: | | | | | | | | | | | | | | | | | | | | | | | | |
| Email address | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Daytime phone number | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobile number | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you entitled to work in the UK? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| If yes, proof will be required. See section 17 or 18 as applicable. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you spent three months or more living outside of the UK since the age of 18? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| If yes, please provide details in section 6a. If no, please continue to section 7. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6a. Details of time spent living outside of the UK (Continue on a separate sheet of paper if necessary. Remember to put your name and date of birth at the top) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country | | | | | | | | | | | Date arrived | | | | | | | | | | | | | | | | Date left | | | | | | | | | |
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| Do you have any convictions, cautions, reprimands, or warnings recorded against you for any offence, including endorsable fixed penalty tickets? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| If yes, please provide details in section 7a, 7b and 7c as applicable. If no, please continue to section 8.  If the answer to the above question is yes, please give full details in respect of each offence or caution. In the case of criminal convictions, please give details of the actual offence, the court concerned and the date of conviction. In the case of cautions, please give details of the offence concerned, the relevant Police force (and preferably the Police station concerned) and the date(s) of the caution(s).  Note: This includes all criminal offences, including those for driving or motoring matters, or for something totally unconnected with driving or motoring. It includes being cautioned by the Police and being given an Absolute or Conditional Discharge by a court. Being fined, Fixed Penalty Notice, Penalty Charge Notice, or Civil Penalty Charge. Being sent to prison, being ordered to carry out community service, being sent to a borstal or detention centre, being the subject of a Probation Order, being Bound Over, being the subject of a Care Order or being the subject of a Supervision Order.  Important: The Rehabilitation of Offenders Act 1974 (Exceptions)(Amendment) Order 2002, allows the licensing authority to take into account all convictions recorded against an applicant or the holder of a private hire vehicle or hackney carriage driver’s licence, whether spent or not. Therefore, the licensing authority will have regard to all relevant convictions, particularly where there is a long history of offending or a recent pattern of repeat offending in accordance with the current Taxi and Private Hire Vehicle Criminal Convictions Policy. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7a. Details of offences (Continue on a separate sheet of paper if necessary. Remember to put your name and date of birth at the top) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of offence | | | | | Date of conviction | | | | | | | | | | | | Offence | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 7b. Details of any endorsements on your DVLA Driving Licence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of offence | | | Date of  conviction | | | | | | | | | | | | Offence code (for example SP30) | | | | | | | | | Fine | | | | Disqualification period | | | | | | | | Penalty points |
|  | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | |  | | | | | | | |  |
| 7c. Have these previously been reported to West Suffolk licensing authority? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| Do you have any pending convictions, cautions or are currently being investigated for any other matter? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| If yes, please provide details in section 8a. If no, please continue to section 9. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8a. Details of pending convictions, cautions or any other matter(Continue on a separate sheet of paper if necessary. Remember to put your name and date of birth at the top) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of offence | | | | | Date of conviction | | | | | | | | | | | | Offence | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Disclosure and Barring Service (DBS) Update Service permission | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| It is a licence condition that applicants sign up to the DBS Update Service and on the grant of a licence, the licence holder must maintain the subscription.  Licensed drivers must give permission for the council to undertake periodic checks of their DBS status should the council consider it necessary to do so. The council will use the DBS Update Service to monitor the criminal record of licensed drivers, and this can also be used at the time of re-licence. If no changes have been recorded on the DBS certificate, a new DBS certificate will not be required. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DBS certificate number | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| DBS certificate date of issue | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Have you subscribed to the DBS Update Service?  (You have limited time from the date of issue of your DBS certificate in which to register). | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes | | | | | | No | | | |
| Date subscribed to the DBS Update Service | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| I consent to West Suffolk Council carrying out a status check periodically for as long as I maintain a hackney carriage and private hire driver licence. (Please tick to confirm) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| I consent to West Suffolk Council to store a copy of my DBS certificate. (Please tick to confirm) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| I consent to West Suffolk Council viewing the online status details of the DBS certificate associated with this consent and to store the information to maintain the council’s personnel records. (Please tick to confirm) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| Do you have any reason to believe that you are not medically fit to drive a vehicle? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | |
| If yes, please provide details in section 10a. If no, please continue to section 11. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **10a. Full details of reasons why you may be medically unfit to drive a vehicle** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Are you currently a holder of a hackney carriage or private hire drivers’ licence with any other authority? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | | | |
| If yes, please provide details in section 11a. If no, please continue to section 12. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11a. Licence details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issuing council | | | | | | Badge number | | | | | | | | | | | | | | Issue date | | | | | | | | | | Expiry date | | | | | | |
|  | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
| Have you ever been refused a licence, or had a licence suspended or revoked by this or any other authority? (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| If yes, please provide details in section 12a. If no, please continue to section 13.  Your personal information will be checked with other agencies in accordance with our privacy statement including a national database of revoked or refused drivers. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12a. Previous licences or applications | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issuing council | | | | | | | Badge number | | | | | | | | | | | | | | Issue date | | | | | | | | | | Expiry date | | | | | |
|  | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | |
| Do you currently hold, or have held in the last 12 months prior to this application, a hackney carriage or private hire driver’s licence with one or more licensing authority (including West Suffolk Council) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | | | | | | | | | | | | | | No | | | | | | | | | | | | | | | |
| If yes, you must complete section 14. If no, you must complete section 15.  **IMPORTANT: We cannot grant a licence if you do not complete either section 14 or 15.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please provide your 9-character tax check code issued within the last 120 days | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Visit this website to generate code: [GOV.UK - Complete a tax check for a taxi, private hire or scrap metal licence](https://www.gov.uk/guidance/complete-a-tax-check-for-a-taxi-private-hire-or-scrap-metal-licence?_gl=1*1r32n68*_ga*MTc0NDg0OTYyNS4xNjQxMjk4MTQ5*_ga_Y4LWMWY6WS*MTY2Mzc1MjQyNS4zNi4xLjE2NjM3NTI0MjUuMC4wLjA.&_ga=2.70131024.1110512167.1663752425-1744849625.1641298149) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | | |  | | | | | | |  | | | | | |  | | |  | | | | | | |  | | | |  |
| Please read and complete this section if you are applying for a licence for the first time or had a licence of the same type that ceased to be valid a year or more before this application was made | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PAYE information: [GOV.UK – How you pay Income Tax](http://www.gov.uk/income-tax/how-you-pay-income-tax)  Registering for self-assessment: [Gov.UK – Register for self-assessment](http://www.gov.uk/register-for-self-assessment)  Corporation Tax information: [GOV.UK – Corporation Tax](http://www.gov.uk/corporation-tax) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I confirm that I am aware of the content of HMRC guidance relating to my tax registration obligations. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| If you intend to, or currently work for a hackney carriage proprietor or a private hire operator, please provide details below | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Trade name of proprietor | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Operator licence number | | | | | | | | | | | | | PO | | | | | | | | | | | | | | | | | | | | | | | |
| Vehicle licence number | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Enclosures (new application)Please include scanned or photographed documents | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Proof of right to work in the UK  Please refer to List A or B of the [GOV.UK - Employers' right to work checklist](https://www.gov.uk/government/publications/right-to-work-checklist/employers-right-to-work-checklist-accessible-version) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| One current passport size colour photograph | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Full DVLA driving licence (front and back) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| DVLA Check Code Licence Summary results page  (Or provide check code – see appendix A) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Enhanced DBS certificate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Group 2 Medical | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| West Suffolk College Level 2 certificate two-day course  (Or BTEC equivalent) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| West Suffolk College Theory Assessment Certificate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Evidence of an approved Practical Driving Assessment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Certificate of Good Conduct issued by the relevant non-UK country. This is required where the applicant has had a period of residence of more than 3 months outside of the UK since the age of 18. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Do you drive or have access to a wheelchair accessible vehicle? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes\* | | | No | |
| \*If you ticked ‘Yes’ you must provide a wheelchair accessible vehicle (WAV) Certificate of Competence. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Request for medical exemption where the driver shows a medical condition will be aggravated by exposure to dogs, if required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Request for medical exemption for not being able to provide mobility assistance to disabled passengers, if required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Enclosures (re-licence) Please include scanned or photographed documents | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Proof of right to work in the UK  Please refer to List A or B of the [GOV.UK - Employers' right to work checklist](https://www.gov.uk/government/publications/right-to-work-checklist/employers-right-to-work-checklist-accessible-version) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| One current passport size colour photograph | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Full DVLA driving licence (front and back) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| DVLA Check Code Licence Summary results page  (Or provide check code – see appendix A) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Enhanced DBS certificate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Taxi Safeguarding Refresher Course completion certificate  (Or proof of booking of a course within 3 months of application) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Certificate of Good Conduct issued by the relevant non-UK country. This is required where the applicant has had a period of residence of more than 3 months outside of the UK since the age of 18. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Group 2 Medical  (Dependent on age or medical condition – See [West Suffolk Council – Hackney Carriage and Private Hire Licensing Policy](https://www.westsuffolk.gov.uk/Business/Licensing-and-regulation/taxi-private-hire-licensing/upload/WSC-hackney-carriage-and-private-hire-licensing-policy.pdf) Appendix B Section 8 for details) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Do you drive or have access to a wheelchair accessible vehicle | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes\* | | | No | |
| \*If you ticked YES you must provide a (WAV) Certificate of Competence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Request for medical exemption where the driver shows a medical condition will be aggravated by exposure to dogs, if required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Request for medical exemption for not being able to provide mobility assistance to disabled passengers, if required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Enclosed | | |  | |
| Not applicable | | |  | |
| Payment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Please note:** Fees must be paid at time of application and proof of payment must be supplied. Incomplete applications will be rejected and the fee will be refunded, which can take up to 5 working days. Pay online: [West Suffolk - Adelanti Smart pay](https://apps.adelante.co.uk/SmartPay/WestSuffolk/Pay4/) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I confirm I have paid the following fee (Please tick as appropriate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One Year £174.00 | | | | | | | | | | | | | | | | | | | | | Three Years £308.00 | | | | | | | | | | | | | | | |
| Payment Reference Number: | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Declarations (please read and tick each box) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I declare that the answers to the questions are correct, and I have read the West Suffolk Council hackney carriage and private hire Licensing Policy available at [West Suffolk Council – Taxi licences](https://www.westsuffolk.gov.uk/Business/Licensing-and-regulation/Licensing/taxi-licensing/index.cfm) and I undertake, in the event of a licence being granted, to observe and comply with its contents. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| Guidance | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Your right to work in the UK will be checked as part of your licence application, this could include the licensing authority checking your immigration status with the Home Office. We may also share information with the Home Office. You must either share your immigration status using the Home Office online checking service ‘prove your right to work to an employer’ if your status is compatible with the service or provide a document or document combination that is stipulated as being suitable for this check. Where an online check has been carried out, the ‘profile’ page confirming your right to work will be copied and retained by the licensing authority. Where a manual check is carried out, and you have provided a document(s) set out at Annex A of the Employers guide. You must provide the original document(s). The document(s) will be copied, and the copy retained by the licensing authority. The original document will be returned to you. Your application will not be considered valid until all the necessary information and any original document(s) have been produced and the relevant fee has been paid.  If there are restrictions on the length of time you may work in the UK, your licence will not be issued for any longer than this period. In such circumstances the check will be repeated each time you apply to renew or extend your licence, if, during this period, you are disqualified from holding a licence because you have not complied with the UK’s immigration laws, your licence will lapse and you must return it to the licensing authority. Failure to do so is a criminal offence. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Privacy and responsibility | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Privacy notice**  West Suffolk Council is a Data Controller and can be contacted at: West Suffolk House, Western Way, Bury St Edmunds, Suffolk, IP33 3YU. Phone: 01284 763233. The Data Protection Officer can be contacted at the same address.  We are collecting your personal information in order to process your application under the Local Government Miscellaneous Provisions Act 1976 and Town Police Clauses Act 1847.  Your data will not be shared with third parties unless used for council purposes, in order to enquire and receive information relating to your licence, prevent or detect crime, to protect public funds or where we are required or permitted to share data under other legislation, for example we will share your data with Defra so that Defra can create a database to support the operation of charging clean air zones by local authorities or other air quality plans, part of your data (licence number, applicant name, date of issue and expiry) will also be included in our Driver Licence Register, which is published online.  Schedule 23 to Finance Act 2011 (Data Gathering Powers) and Schedule 36 to Finance Act 2008 (Information and Inspection Powers), grant HMRC powers to obtain relevant information from third parties. This includes licensing bodies being required to provide information about licence applicants.  Your data will be kept for twenty-five years post licence expiry or surrender and in line with our retention policy.  You have the right to access your data and to rectify mistakes, erase, restrict, object or move your data in certain circumstances. Automated decision making and processing is not used during this application. Please contact the Data Protection Officer for further information or go to our website where your rights are explained in more detail. If you would like to receive an explanation of your rights in paper format, please contact the Data Protection Officer.  Any complaints regarding your data should be addresses to the Data Protection Officer in the first instance. If the matter is not resolved you can contact the Information Commissioner’s Office at: Wycliff House, Water Lane, Wilmslow, Cheshire, SK9 5AF Phone: 0303 123 1113.  If you do not provide the information required on the application form, then we will not be able to process application for a licence. Your data must be kept up to date in accordance with the conditions of your licence.  For more information on our data protection policies please go to our website: [West Suffolk Council - How we use your information](https://www.westsuffolk.gov.uk/privacy/howweuseinformation.cfm) or email: [data.protection@westsuffolk.gov.uk](mailto:data.protection@westsuffolk.gov.uk) Fraud Act 2006 Applicants are advised that to make a false statement, knowingly or recklessly or omit any information from this application is an offence punishable on conviction by a fine or imprisonment for a term not exceeding two years or both.  I hereby declare that I fully understand, have read and checked the details and questions on this application form and the foregoing statements are true.  I understand that it is a criminal offence if I or anyone else gives false information, or makes a false representation within this application, or fails to disclose information in order for me to obtain a licence.  I am fully aware that the provision of a false statement, or information in order to obtain a licence is an offence under the above act which may result in the refusal of this licence application and any subsequent licence applications.  I am also aware that any licence granted as a result of breaching the above act will be immediately revoked. I have read the West Suffolk Council hackney carriage and private hirepolicy, and I undertake, in the event of a licence being granted, toobserve and comply with its contents. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Applicant to sign below** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (block capitals) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | |  | | | | | | | | | | | | | | | | Date | | |  | | | | | | | |
| Your complete application should be sent on one email to: [licensing@westsuffolk.gov.uk](mailto:licensing@westsuffolk.gov.uk). The subject line should state either **New Driver Licence** or **Driver Re-Licence (licence number)**. Each supporting document should be added as an attachment. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



## Appendix 1

### DVLA validation check code

#### View or share your driving licence information

This service allows the council to check your driving licence status, issue number and validity dates, vehicle codes and disqualifications or penalties. Driver consent is captured through a unique check code generated by the driver using DVLA View Driving Licence Service.

* Visit: [GOV.UK – View or chare your driving licence informaiton](http://www.gov.uk/view-driving-licence)
* You will need
  + your driving licence number
  + your National Insurance number ([GOV.UK – Find a lost National Insurance number](https://www.gov.uk/lost-national-insurance-number))
  + the postcode on your driving licence
* The ‘check code’ is only valid for **21 days** from the day it is generated
* Once you have completed the check code online, you can either enter the code (which is case sensitive) in the boxes below or print or screenshot the web page with the code on
* **or** you can complete the check yourself using your check code and print or screenshot the results.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please ensure the code below is valid for at least 14 days before expiry.**  As the code is case sensitive it is important to be clear whether the letters are upper case or lower case. Please enter one character or letter per box putting uppercase in the upper boxes and lower case in the lower boxes. Numbers can go in either. | | | | | | | | | |
| Upper case: |  |  |  |  | |  |  |  |  |
| Lower case: |  |  |  |  | |  |  |  |  |
| **Date validation code obtained:** | | | | |  | | | | |

**Example:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Upper case: | A |  | D |  | S |  |  | T |
| Lower case: |  | c |  | 7 |  | p | j |  |

**Please either complete this form or print or screenshot your results and attach to your driver application.**