

Change of registration mark on existing licence form

Local Government (Miscellaneous Provisions Act) 1976 Town Police Clauses Act 1847

Please note:

- Please complete in conjunction with the guidance notes and policy at <u>West</u>
 Suffolk Council Taxi licences
- All sections must be completed, and all supporting documents supplied. Incomplete applications may be rejected.
- Once a complete application has been reviewed the Licensing team will contact you for payment.

1. Current licence (Please tick as appropriate)									
Type of licence		Hac	kney carr	iage		Private hire			
Licence number	icence number				Expiry date				
2. Applicant -	first	t or	only pro	prietor	(Please tic	k as ap	propria	ate)	
Title	Mr		Mrs	Miss	Ms	Other (please state)			
Forenames									
Surname									
Date of birth									
National Insura number	nce								
West Suffolk driver number		CD							
Permanent address (This will be used for all correspondence)		Add	lress:						
		Pos	tcode:						
Email address									
Daytime phone number									
Mobile number									
Are you the registered keeper of the vehicle?			Yes			No			
Are you the legal owner of the vehicle?		Yes			No				

3. Second pro	prietor	(Please	e tick	as	approp	priate)					
Title	Mr	Mrs		Mis	s	Ms	Othe	r (plea	se state)		
Forenames											
Surname											
Date of birth				Na	ationa	l Insuran	mber				
West Suffolk driver number				CD							
Permanent address (This will be used for all correspondence)				Address: Postcode:							
Email address											
Daytime phone	number										
Mobile number											
Are you the registered keeper ovehicle?				of the		Yes			No		
Are you the legal owner of the vehicle?					Yes			No			
4. Third propr	ietor (Ple	ease t	ick a	as a	pprop	riate)					
Title	Mr	r Mrs Mis				Ms Other (please state)					
Forenames											
Surname											
Date of birth		N				ational Insurance Number					
West Suffolk driver number				CD							
Permanent address (This will be used for all correspondence)				Address: Postcode:							
Email address											
Daytime phone number											
Mobile number											
Are you the registered keeper ovehicle?				of the		Yes		No			
Are you the legal owner of the vehicle?				Yes			No				
Use additional sheet for further proprietor(s)											

5. Previous registration mark						
Registration plate						
6. New registration mark						
Registration plate						
7. Application enclosures (S	scanned or photographed documents)					
Full V5C document						
Insurance certificate or cover note showing the use as private or public hire						
8. Declarations (please read	d and tick each box)					
•	e to drive the vehicle at all times must and private hire driver's licence issued					
the West Suffolk Council hackne available at West suffolk Council	e questions are correct and I have read y carriage and private hire policy - Taxi licences and I undertake, in the , to observe and comply with its					

9. 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.

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 further information on our data protection policies please go to our website: <u>How we use your information</u> or email: <u>data.protection@westsuffolk.gov.uk</u>

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 hire policy, and I undertake, in the event of a licence being granted, to observe and comply with its contents.

All Persons having commercial interest in this application are required to sign below. Applicant one Name (block capitals) Signature Date Applicant two Name (block capitals) Signature Date **Applicant three** Name (block capitals) Signature Date This completed form along with all supporting documents should be submitted

electronically to the licensing department - licensing@westsuffolk.gov.uk