

HACKNEY CARRIAGE & PRIVATE HIRE (DUAL) DRIVER LICENCE

ANNUAL DECLARATION FORM

This application form must be completed in full, and legibly.

It is the policy of the Licensing Authority to carry out annual background checks as to the status of licensed drivers, in order to promote our objectives of safeguarding the public.

All of the questions on this **Annual Declaration Form** must be answered.

The completed Declaration Form must be submitted to the Licensing Authority by way of a pre-booked appointment (please telephone 01623 457589 to book your appointment).

FULL NAME: _____

ADDRESS: _____

_____ **POSTCODE:** _____

CONTACT TEL. NO.: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____

NATIONAL INSURANCE NO.: _____

HC & PH (DUAL) DRIVER LICENCE NO. (BADGE): _____

NAME OF YOUR TAXI / PRIVATE HIRE OPERATOR: _____

HAVE THERE BEEN ANY CHANGES TO YOUR HEALTH / MEDICATION SINCE YOU LAST SUBMITTED A GROUP II STANDARD MEDICAL CERTIFICATE TO THE COUNCIL?

YES **NO** (tick the appropriate box)

IF YOU HAVE ANSWERED "YES", PLEASE GIVE DETAILS (INCLUDING ANY MEDICATION THAT YOU ARE TAKING) BELOW:

PLEASE NOTE: IT IS AN OFFENCE TO FAIL TO DECLARE SUCH MATTERS

HAS YOUR DVLA DRIVER LICENCE BEEN SUSPENDED / REVOKED / ENDORSED FOR ANY OFFENCE SINCE THE ISSUE OF YOUR CURRENT HC&PH (DUAL) DRIVER LICENCE?

YES **NO** (tick the appropriate box)

IF YOU HAVE ANSWERED "YES", PLEASE GIVE DATES AND FULL DETAILS:

PLEASE NOTE: IT IS AN OFFENCE TO FAIL TO DECLARE SUCH MATTERS

HAVE YOU BEEN CONVICTED OR CAUTIONED FOR A CRIMINAL OFFENCE SINCE THE LAST TIME YOU SUBMITTED AN ENHANCED DBS DISCLOSURE TO THE COUNCIL?

YES **NO** (tick the appropriate box)

ARE YOU CURRENTLY AWAITING TRIAL OR FACING CHARGES FOR A CRIMINAL OFFENCE

YES **NO** (tick the appropriate box)

IF YOU HAVE ANSWERED “YES” TO EITHER OR BOTH OF THE ABOVE QUESTIONS, PLEASE GIVE DATES AND FULL DETAILS (INCLUDING PENDING COURT DATES):

PLEASE NOTE IT IS AN OFFENCE TO FAIL TO DECLARE SUCH MATTERS



General Data Protection Regulation 2016 (GDPR) / Data Protection Act 2018 (DPA) - Privacy Notice.

Under the GDPR and DPA, Ashfield District Council, Urban Road, Kirkby in Ashfield, Nottingham. NG17 8DA is a Data Controller for the information it holds about you. The Council will hold the information above provided by you for assessing your application. The lawful basis under which the Council uses personal data for this purpose is Public Task.

The information provided by you includes the following special categories of personal data:

- **Physical or Mental Health**
- **Genetic / Biometric data**
- **Criminal History (including motoring offences)**

Information in these categories is used by the Council on the basis that such use is necessary for reasons of substantial public interest, and in accordance with the provisions of the Data Protection Act 2018.

Your data will be held for a period of 6 years. Subject to some legal exceptions, you have the right to request a copy of the personal information the Council holds about you; to have any inaccuracies corrected; to have your personal data erased; to place a restriction on our processing of your data; to object to processing; and to request your data to be ported (data portability). The information provided by you may also be used for other functions carried out by the Council in accordance with GDPR and DPA. For more information about how the Council may use your data and to learn more about your rights please see the Council's Privacy Statement: www.ashfield.gov.uk/privacy

If you have any concerns or questions about how your personal data is processed, please contact the Council's Data Protection Officer at the address at the bottom of this form or by email to dpo@ashfield.gov.uk . If you are dissatisfied with the Council's response you can complain to the Information Commissioner's Office in writing to: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or by telephone 0303 123 1113 (local rate) or 01625 545 745.

If you have any concerns or questions about how your personal data is processed, please contact the Council's Data Protection Officer at the address at the bottom of this form or by email to dpo@ashfield.gov.uk . If you are dissatisfied with the Council's response you can complain to the Information Commissioner's Office in writing to: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or by telephone 0303 123 1113 (local rate) or 01625 545 745.

Disclosure & Barring Services (DBS): Privacy Notice

As part of the application process, Ashfield District Council (as a Registered Body) will apply for either a Standard or Enhanced DBS Check to assess the applicants' suitability to hold / continue to hold a licence.

Privacy Policy Declaration:

I, the undersigned, hereby declare that I have read the Standard / Enhanced Check Privacy Policy for applicants:

<https://www.gov.uk/government/publications/dbs-privacy-policies>

and I understand how DBS will process my personal data and the options available to me for submitting an application.

Signature of Applicant: _____ **Date:** _____

Consent to obtain electronic Standard / Enhanced Check result (if using the DBS Update Service):

I consent to the DBS providing an electronic result directly to the Registered Body that has submitted my application. I understand that an electronic result contains a message that indicates either the certificate is blank or to await the certificate which will indicate that my certificate contains information. In some cases the Registered Body may provide this information directly to my employer prior to me receiving my certificate.

Signature of Applicant: _____ **Date:** _____

Declaration

I, the undersigned, hereby declare that the information contained in this application is true and accurate to the best of my knowledge.

I understand that if I knowingly or recklessly make a false statement or omit any material particularly in giving information as part of this application I shall be committing an offence and will be liable for prosecution.

I give my consent to the Licensing Authority to undertake checks of my records by way of the DVLA, the DBS, and my G.P. / Doctor in order to promote the objective of upholding public safety.

I confirm I have read the General Data Protection Regulation 2016 (GDPR) / Data Protection Act 2018 (DPA) - Privacy Notice and the Disclosure & Barring Services Privacy Notice above.

Signature of Applicant: _____ **Date:** _____