

APPENDIX ONE:

APPLICATION FORM: PRIVATE HIRE OPERATOR LICENCE

The default position under Section 56 of the Local Government (Miscellaneous Provisions) Act 1976 (as amended by the Section 10 of the Deregulation Act 2015) is for the Council to issue a Private Hire Operator Licence for a maximum period of five years.

The Council does have the discretion to grant a licence for a lesser period than 5 years if it is appropriate in the circumstances of the case. Should you feel that this is appropriate, you will need to provide the necessary mitigation/evidence.

This application form should be completed in full and legibly.

TYPE OF APPLICATION: **NEW** **RENEWAL** (tick as applicable)

APPLICANT DETAILS (please complete all sections)

NAME: _____

ADDRESS: _____

POSTCODE: _____ **TELEPHONE NO.:** _____

If more than one applicant, please complete second applicant's details below:

NAME: _____

ADDRESS: _____

POSTCODE: _____ **TELEPHONE NO.:** _____

If more than two applicants, please continue on a separate sheet

HAVE YOU, OR ANY OF YOUR BUSINESS PARTNERS, EVER HAD A LICENCE REFUSED, SUSPENDED OR REVOKED PREVIOUSLY? **YES** **NO** (tick as applicable)

IF YES, PLEASE PROVIDE DETAILS: _____

BUSINESS DETAILS (please complete all sections)

CURRENT PRIVATE HIRE OPERATOR LICENCE NO.: _____

EXPIRY DATE OF CURRENT OPERATOR LICENCE: _____

TRADING NAME: _____

OPERATING ADDRESS: _____

POSTCODE: _____ TEL. NO.: _____

EMAIL: _____ WEBSITE: _____

REGISTERED COMPANY NO.: _____

HAS PLANNING CONSENT BEEN OBTAINED? YES NO (tick as applicable)

NUMBER OF PRIVATE HIRE VEHICLES OPERATED? _____

NUMBER OF HACKNEY CARRIAGES OPERATED? _____

VEHICLE DECLARATION FORM COMPLETED? YES NO (tick as applicable)

CONVICTIONS (all applicants)

Applicants must disclose all criminal convictions (which under the terms of the Rehabilitation of Offenders Act 1974 are not “spent”), and any pending prosecutions.

DO YOU HAVE ANY CRIMINAL CONVICTIONS? YES NO (tick as applicable)

DO YOU HAVE ANY PENDING PROSECUTIONS? YES NO (tick as applicable)

IF YOU HAVE ANSWERED “YES” TO EITHER OF THE ABOVE QUESTIONS PLEASE PROVIDE FURTHER INFORMATION BELOW:

DATE OF OFFENCE: _____

NATURE OF OFFENCE: _____

NAME AND PLACE OF COURT: _____

SENTENCE OR ORDER: _____

REASON FOR OFFENCE: _____

Please continue on a separate sheet if there are further declarations to declare.



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.

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 DBS and any other relevant body in order to promote the objective of upholding public safety both prior to the consideration of this application, and if granted, at any time during the duration of the licence.

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

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

Disclosure & Barring Services (DBS): Privacy Notice

As part of this application, all persons applying for the Private Hire Operator Licence must submit a Basic DBS Disclosure or provide consent to Ashfield District Council to obtain an electronic result by way of the DBS Update Service.

An applicant for a Private Hire Operator Licence who currently holds a Hackney Carriage & Private Hire (Dual) Driver Licence issued by Ashfield District Council, and who is enrolled with the DBS Update Service need not submit a Basic DBS Disclosure with their application.

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.

Please tick here:

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 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.

Please tick here:

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

FOR OFFICIAL USE ONLY

Application: Approved / Refused

Signed:_____

Date:_____

Officer Name:_____

Position:_____

REASON FOR DECISION:

LICENCE NO.:_____ **DATE OF ISSUE:**_____ **EXPIRY DATE:**_____