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SCARBOROUGH BOROUGH COUNCIL

Licensing Services, Town Hall, St Nicholas Street, Scarborough, YO11 2HG

New/Renewal Application for a Private Hire Operators Licence

Please ensure all names and registration numbers are correct and legible.

*** = Delete as appropriate.**

1. APPLICANT DETAILS			
TITLE (delete as appropriate): Mr Mrs Miss Ms Other (please state)			
Surname			
Forenames			
Trading Name			
ADDRESS			
I/we declare that the correct address for the service of all documents in connection with this application and any licence granted in connection with it is;			
Post town	Post code	E-mail	
TELEPHONE NUMBERS (Landline & mobile)			
Daytime			
Evening			
Mobile			
E-mail address			
Signed		Dated	
* Sole applicant / Partner / Co Secretary / Managing Director / Authorised Signatory			
LIST OF PREMISES TO BE COVERED BY THIS LICENCE			
List every address at which you are in (or intend to carry on) business as a Private Hire Operator.			
I declare that the only premises (other than listed free phones) covered by this licence are;			
Main Base		Post code	
1 st Satellite		Post code	
2 nd Satellite		Post code	

**ALL BOOKING TELEPHONE NUMBERS
METHODS OF RECEIVING BOOKINGS**

Please list all telephone numbers through which you receive / intend to receive bookings from members of the public. (Including mobile phones)
Please also list any other methods of booking that you currently use / intend to use, for example Internet or Text etc, including; Daytime – Evening - Mobile

	Tick box	Enter the number / detail below
Telephone day	<input type="checkbox"/>	
Telephone evening	<input type="checkbox"/>	
Telephone mobile	<input type="checkbox"/>	
E-mail	<input type="checkbox"/>	
Other (e.g Text or Internet)	<input type="checkbox"/>	
Transfer (landline to mobile)	<input type="checkbox"/>	

LIST OF CONVICTIONS (of any party connected with this application)

NAME	DATE	CONVICTION/OFFENCE	SENTENCE

2. COMPANY DETAILS

COMPANY NAME

If limited company state registration number (and the registered office)

COMPANY ADDRESS

Post town

Post code

TELEPHONE NUMBER

Location of off-street parking facilities for each premises listed in section 1

1.

2.

3.

Enclosures (Please tick)

I have enclosed the full 5 year fee

I would like to pay by annual direct debit and have enclosed the first years fee

I have enclosed a completed direct debit request

Declaration (Please tick)

I understand that I may be liable for prosecution if I have knowingly or recklessly made a false statement or omitted any material particular to this application.

I understand that it is a criminal offence to state anything in this application which is false or which I do not believe to be accurate or true.

I declare that I will comply with the Scarborough Borough Councils Taxi & Private Hire Policy.

Signature

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

As part of the application process, all applicants are required to provide details of all convictions, cautions and fines that may have accrued over time. All such offences should be disclosed regardless of age. The Council will handle such data in accordance with the Data Protection Act 1998, the principles laid down by the Information Commissioner's Office and the Council's Data Retention and Disposal Schedule.

The data is used as part of the statutory application process to determine whether applicants are a 'fit and proper' person to hold the respective licence. This process may include the information being presented to the Council's Licensing Committee for determination.

Signature:**Date:****Authority to collect information**

I hereby declare that the information given in this form is true, complete and correct and that I have no objections to, and hereby authorise the council to make such enquiries as may be necessary to check the truth of that information, which could include requesting information from other Councils, Police and Government departments such as the Home Office. I authorise Scarborough Borough Council to enquire and receive information relating to my licence and/or conduct matters relevant to my application.

Signature:**Date:**