

Licensing Office, Horbury Community Centre,  
Cluntergate, Horbury, Wakefield, WF4 5DA

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FEE TO PAY

DATE STAMP

CHECKED BY

## HOW TO APPLY FOR THE:-

# GRANT/ RENEWAL OF A PRIVATE HIRE OPERATOR LICENCE

*Local Government (Miscellaneous Provisions) Act 1976*

## **(MAIN BUSINESS PREMISES)**

**Submit to the Licensing Office, Horbury Community Centre, Cluntergate, Horbury.**  
**Closed for lunch 12.30pm to 1.30 pm Monday to Friday**

Open Monday to Thursday 9.30 am to 4.30 pm  
Open Friday 9.30 am to 4.00 pm

1. **Application Form** (completed in full)
2. **Fee** (see fees list)  
(Please Note:- Administration Charge when application refused, withdrawn or otherwise not proceeded with - £64.00)
3. **DVLA Driving Licence\*** – If new style both photo card and counterpart must be produced. Old style paper licence is still acceptable.
4. **Birth Certificate** or **Current Passport** or **Certificate of British Nationality \***
5. **Basic Criminal Record Disclosure from Scottish Criminal Record Office\*** (Disclosure can be no more than 1 month old at time of application)  
(Required every 3 years if applicant NOT a licensed Private Hire or Hackney Carriage Driver)
6. **Planning Permission** - Please ensure that you have the relevant information regarding Planning Permission and evidence which proves that either Planning Permission is in force **OR** written clarification from the Development Department that permission is not required to run a Private Hire Business from your business address.
7. **Marriage Certificate\*** (Married Women Only)
8. **Deed Poll or Adoption Certificate\*** (if name changed other than by marriage)
  - *If joint application, documents for both applicants to be produced.*

### DATA PROTECTION ACT 1998

The City of Wakefield MDC requires this information in order to process your application for a licence. The Council is under a duty to protect the public funds it administers and may use the information you have provided within the Authority for the prevention and detection of fraud. From time to time, as prescribed by Law, we will share your information with other Local Government Departments such as the Inland Revenue, Benefits Agency and the Police.

# APPLICATION FOR GRANT/RENEWAL OF PRIVATE HIRE OPERATOR LICENCE

## (MAIN PREMISES)

1. **Staff are not allowed to complete or amend forms on behalf of applicants for legal reasons.**
2. Please complete the form in BLACK INK and in BLOCK CAPITALS
3. Applicants are warned against knowingly making any false or reckless statement for the purpose of obtaining a licence. The current maximum fine on conviction is £1,000.

What type of application is this? <i>(Tick correct box)</i>	First Grant <input type="checkbox"/>	Renewal <input type="checkbox"/>
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Licence Number <i>(if previously licensed)</i>		Date of Expiry	
Badge Number of 1st Applicant <i>(if applicable)</i>		Badge Number of 2nd Applicant <i>(if applicable)</i>	

If no private hire or hackney carriage driver licence is held the applicant must supply every 3 years **a Basic Criminal Record Disclosure from Scottish Criminal Record Office**. The disclosure can only be obtained from Disclosure Scotland and their contact details are as follows;

Tel: 0870 6096006

Fax: 0870 6096996

Web: <http://www.disclosurescotland.co.uk>

**Please note:** Disclosures can be obtained online at the above address.

*The disclosure can be no more than 1 month old at time of application*

### FULL DETAILS OF APPLICANT (S) FIRST OR SOLE OPERATOR OF THE BUSINESS (The person to whom all correspondence will normally be sent)

Surname:						Date of Birth:	
Title:	Mr	Ms	Mrs	Miss	Other	Full Forenames:	
Home Address:							
						Post Code:	
Telephone No:						Mobile Tel No:	
Email address:							

### JOINT OPERATOR OF THE BUSINESS (IF ANY)

Surname:						Date of Birth:	
Title:	Mr	Ms	Mrs	Miss	Other	Full Forenames:	
Home Address:							
						Post Code:	
Telephone No:						Mobile Tel No:	
Email address:							

If the applicants(s) hold Private Hire Vehicle Licences, state plate numbers:

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Name of Firm:  
(State exact wording to be used)

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If front or rear screen identification signs are to be used please give details of wording /colours below:

Wording:

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Colour of Lettering:

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Colour of Background:

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If rear passenger doors or on multi passenger vehicle rear side panel identification signs are to be used please give details of wording / colours below:

Wording:

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Colour of Lettering:

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Colour of Background:

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Please note:- each vehicle proprietor operating through your company must apply for individual sign approval for their vehicle.

### BUSINESS PREMISES

Business Address:

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Post Code:

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Telephone No. (s)  
(Land line only)

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**The Council does not authorise the use of mobile phones for operator bookings. Bookings must be recorded at the premises on the land line**

The Operator shall not cause or permit the business premise to be used by any other person(s) for any purpose other than that connected with the conduct or operation of the private hire business. (An application which involves the use of facilities on or within the curtilage of liquor licensed premises will not be deemed acceptable).

**PLEASE NOTE A SEPARATE APPLICATION MUST BE SUBMITTED IN RESPECT OF EACH ADDITIONAL PREMISE TO BE LICENSED.**

### PLANNING DETAILS

I have submitted a letter from Planning with this application giving planning permission.

Yes  No

PLANNING REFERENCE:

DATE:

I have submitted a letter from Planning with this application stating that planning permission is not required.

Yes  No

I have made application for planning and I will submit a letter from planning:

Yes  No

**I AM AWARE that an Operator Licence cannot be issued until I submit a letter from planning regarding suitable planning permission.**

**Signed:** .....

It is important that you make sure that the buildings and/or land you use, or propose to use, in connection with your Private Hire Operator business do not give rise to any contravention of the Town and Country Planning Acts and/or Regulations made thereunder, otherwise the Council may be left with no alternative but to invoke their planning enforcement powers against you.

Have you previously made an application for an operator licence? <i>(Both applicants if applicable)</i>	1st Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	2nd Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Has an operator licence held by you ever been revoked or suspended ? <i>(Both applicants if applicable)</i>	1st Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	2nd Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If YES, please state which	Revocation	<input type="checkbox"/>	Suspension	<input type="checkbox"/>	

Date of Suspension/Revocation:	
Name of Local Authority:	
Reason for Suspension/Revocation:	

Are you aware of <b>any enquiries</b> being made involving yourself by the Police or any Local Authority in relation to any matter <i>(Both applicants if applicable)</i>					
<b>POLICE</b>			<b>LOCAL AUTHORITY</b>		
1st Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
2nd Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
	<i>(Tick correct box)</i>			<i>(Tick correct box)</i>	
If YES, please provide details			If YES, please provide details		

Have you had <b>any summons</b> served on you which has still not been heard in Court ? <i>(Both applicants if applicable)</i>					
1st Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
2nd Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
If YES, please give details					

**DECLARATION OF FIRST OR ONLY PROPRIETOR**  
(Read notes on Rehabilitation Periods overleaf)

Surname:						Date of Birth:	
Title:	Mr	Ms	Mrs	Miss	Other	Full Forenames:	
Home Address:							
						Post Code:	

**List below ALL unspent convictions. If none then write "NONE". Motoring fixed penalties must ALSO be disclosed.**

Date of Conviction	Offence	Court	Sentence/Order/Fixed Penalty Points/Fine

I list above all my unspent convictions.

Usual Signature: \_\_\_\_\_ Dated \_\_\_\_\_

**DECLARATION OF SECOND OR PART PROPRIETOR (IF ANY)**  
(Read notes on Rehabilitation Periods overleaf)

Surname:						Date of Birth:	
Title:	Mr	Ms	Mrs	Miss	Other	Full Forenames:	
Home Address:							
						Post Code:	

**List below ALL unspent convictions. If none then write "NONE". Motoring fixed penalties must ALSO be disclosed.**

Date of Conviction	Offence	Court	Sentence/Order/Fixed Penalty Points/Fine

I list above all my unspent convictions.

Usual Signature: \_\_\_\_\_ Dated \_\_\_\_\_

<p><b>APPLICANTS ARE ADVISED THAT TO KNOWINGLY OR RECKLESSLY MAKE A FALSE STATEMENT OR OMIT ANY MATERIAL PARTICULAR FROM THIS APPLICATION OR ANY DOCUMENT SUBMITTED WITH IT, IS AN OFFENCE PUNISHABLE ON CONVICTION BY A FINE OF UP TO £1,000.</b></p>
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## NOTES FOR APPLICANTS

Spent convictions - Under the Rehabilitation of Offenders Act 1974 (as amended) you are not obliged to disclose any offence resulting in one of the Sentences in the left-hand column below if the corresponding period in the right-hand column has elapsed. It should be noted that a rehabilitation period can be extended if a person is convicted within that period of a further offence whether of the same or a different kind.

### REHABILITATION PERIODS

**Table A**

<b>Sentence</b>	<b>Period</b>
Imprisonment, youth custody or corrective training exceeding 6 months but not exceeding 30 months.	10 years
Imprisonment or youth custody not exceeding 6 months.	7 years
Fine or any other sentence not in Table B, e.g. Community Service Order	5 years
NOTE: THESE PERIODS ARE SUBJECT TO REDUCTION BY HALF FOR PERSONS UNDER 17	

**Table B - Rehabilitation periods for certain sentences confined to young offenders**

<b>Sentence</b>	<b>Period</b>
Borstal training	7 years
Detention exceeding 6 months but not exceeding 30 months	5 years
Detention not exceeding 6 months	3 years
Detention Centre Order	3 years

#### Miscellaneous

<b>Sentence</b>	<b>Period</b>
Absolute discharge	6 months
Conditional discharge, binding over, probation, committal to care of fit person, Supervision Order, Care Order	1 year from the date of conviction OR the date on which the order or requirement ceases - which ever is the longer
Remand Home Order                    ) Approved School Order                ) Attendance Centre Order                )	1 year after Order ceases to have effect
Driving disqualification and/or endorsements when no fine was imposed	The date on which the disqualification etc. ceases to have effect
Driving conviction whether or not involving disqualification and when fine imposed. (This category includes fixed penalties)	5 years
Hospital Order under the Mental Health Act	The period of the Order and a further 2 years after it expires
Cashiering, discharge with ignominy or dismissal with disgrace from the Armed Forces	10 years
Dismissal from Armed Forces	7 years

#### Sentences Excluded from Rehabilitation

Life imprisonment, preventative detention, sentence of imprisonment, youth custody or corrective training exceeding 30 months; sentence of custody for life.

## PART 2

Are you or have you ever been a <b>Director</b> or <b>Secretary</b> of a company? (Both applicants if applicable)	1st Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	2nd Applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

(Tick Correct Box)

Particulars of any convictions recorded against the **Company** or **Companies**  
 (Only to be completed if answer to the above question is YES)

Name of Company	Trade of Business of that Company	Date of Conviction	Court	Offences	Decision of Court

Has any previous application been made by such Company/ Companies for an Operator licence or licences?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If Operator licence or licences previously held by such Company/Companies, was there any revocation or suspension?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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## PART 3

Is the application in respect of a duly registered company? If YES, complete <b>Part 3</b>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Particulars of any convictions recorded against the **Director** or **Secretary** of the Company  
 (Only to be completed if the above answer is YES)

Name of Company	Trade of Business of that Company	Date of Conviction	Court	Offences	Decision of Court

(Please see notes on reverse of Conviction Declaration regarding Rehabilitation Periods)

State below trade or business activities any such director or secretary has carried out in the past and now.

Name	Description of Trade or Business Activities	Period Carried on From	To	Position in Trade or Business

Has any director or secretary previously applied for any operator licence ? If YES, state name(s) below:-	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Has there been any revocation or suspension of an operator licence previously held by such person(s) ? If YES, state name(s) below:-	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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I DECLARE that my/our answers to all the questions in Parts 1, 2 and 3 of this application and the Declaration(s) of Unspent Convictions provided by me/us and all particulars entered on this form are true to the best of my/our knowledge and belief and I/we authorise the Council to make such enquiries in connection with this application as are thought necessary. I/We are aware of the warnings on this application form.

**These names WILL appear on the licence if granted**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(First or only Applicant)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Second Applicant)

**These names will NOT appear on the licence, but will be kept on the Council's records**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Partner/Director)  
Name: \_\_\_\_\_

Signature: - \_\_\_\_\_ Date: \_\_\_\_\_  
(Partner/Director)  
Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Partner/Director)  
Name: \_\_\_\_\_

(To be signed by the applicant(s) and **all** partners/directors. If more than 3 partners/directors additional copies of this part of the form may be requested).

**IMPORTANT**

It is an offence to operate a private hire vehicle(s) unless and until a licence or any renewal thereof is issued to you. Merely submitting an application form for the grant or renewal of a licence does not entitle you to start work or, if a renewal, entitle you to continue beyond the expiry date of the licence. You must wait until the actual official licence, issued under the hand of the duly authorised Officer of the Council, is in your possession, otherwise you are liable to prosecution.

**Should you require any further general information regarding completion of the form please contact the Licensing Office. In view of the possible serious consequences if incorrect information is submitted you may wish to consider consulting your Solicitor if in doubt.**

## LC03 - PRIVATE HIRE OPERATOR LICENCE

Grant of Operator Licence (for up to 12 months)	£207.00
Renewal of Operator Licence (for up to 12 months)	£192.00
Additional premises	£75.00
Fee for duplicate licence (eg amendment, replacement)	£22.00
Request for factual information from file (per file)	£10.00
Administration charge when application refused, withdrawn or otherwise not proceeded with	£64.00