

# 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, however you can apply for a licence of a shorter duration.

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

<b>TYPE OF APPLICATION:</b>					
<b>NEW</b>	<b>RENEWAL</b>	(tick as applicable)			
<b>LENGTH OF LICENCE APPLIED FOR:</b>					
1 YR	2YR	3YR	4YR	5YR	(tick as applicable)
<b>APPLICANT DETAILS (please complete all sections)</b>					

**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: \_\_\_\_\_

COMPANY REG. NO.: \_\_\_\_\_

TEL. NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE ADDRESS: \_\_\_\_\_

HAS PLANNING CONSENT BEEN OBTAINED? 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](http://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](mailto: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 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 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:**

**Disclosure & Barring Services (DBS): Code of Practice**

Ashfield District Council (as a Registered Body) is required to ensure that applicants are aware of the DBS Code of Practice, which can be found online at: <https://www.gov.uk/government/publications/dbs-code-of-practice> (a copy may also be obtained from the Council Offices).

The Council has a Policy on the secure handling of information provided by the DBS, and this can be found on the Council website at: <https://www.ashfield.gov.uk/dbspolicy> (a copy may also be obtained from the Council Offices).

**DBS Code of Practice Declaration:** I am aware of the DBS Code of Practice and Ashfield District Councils Policy on the secure handling of information provided by DBS.

**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:** \_\_\_\_\_