## **Application for a Driver's Licence**



- Town Police Clauses Act 1847
- Local Government (Miscellaneous Provisions) Act 1976

## Please read the Application Guidance before attempting to complete this application form.

You must not drive for hire until you have obtained the relevant licence from Lewes District Council.

I hereby apply to Lewes District Council, subject to the provisions of the Town Police Clauses Act 1847 and the Local Government (Miscellaneous Provisions) Act 1976, for a licence to drive a Hackney Carriage / Private Hire vehicle within the district of Lewes.

Please complete <u>ALL</u> sections of this form in block capitals using black ink.

1.	Type of Licence	Dual (Hackney & Private Hire Driver)	
		Restricted Private Hire	
	<b>Duration of Licence</b>	3 Year Drivers Licence	
	Should you surrender a a refund of any un-used	3 year licence prior to its explication of the sexplication of the	oiry,
2.	Title (Please Circle)	Mr / Mrs / Miss / Ms / Mx Other (Please Specify)	
	Surname / Family Nar	me	
	Forename(s)		
	Home Address		
	Postcode	Home Telephone No.	
	Mobile Telephone No		
	Email Address		
	Date of Birth	Place of Birth	
	How long have you live	Voorc	Months

3.	Eligibility to work in the UK (Tick Box)					
	Do you require a work permit for this employment' You must provide ONE of the following original eligibility to work		□ ts conf	No firming		
	UK Birth Certificate					
	Relevant Passport from European Commission	n 🗆				
	Relevant Work Permit					
	Proof of settlement status					
	National Insurance Number					
4.	Do you currently or have you ever previous Vehicle Licence or a Private Hire Operator's Council or any other authority?	•			•	
	(Tick Box)	Yes		No		
	If yes, please state which authority					
5.	Have you ever been refused a Drivers Lice Private Hire Operators Licence by Lewes Dauthority?	•				
	(Tick Box)	Yes		No		
6.	Have you ever had a Drivers Licence, Vehic Operators Licence suspended or revoked l	by Lewes I	Distric	t Counc	il or	
	any other authority? (Tick Box)	Yes		No		
	If YES to any of the above, please state whether refused or revoked, by which authority, with re			•	led,	

7.	Have you ever ANY offence?			l or cauti	oned for	Yes		No		
	If yes, please give full details of ALL convictions, cautions, warn reprimands and/ or point endorsements. THIS INCLUDES ALL 'CONVICTIONS and motoring matters.								T'	
	(See Guidance Notes for further clarification or please contact the Licensing Section to discuss the matter further)									
		Date of conviction/ Caution/ Warning/ Reprimand					Penalty			
	(Continue on a se	eparate	sheet if ne	ecessary)						
8.	If you are app	lvina fa	or the sa	me tyne (	of Licenc	e that v	ou nro	wiou	elv	
0.	held, that ceas									
	same type of I									
	you MUST pro you leave this			ax Checi	Code. II	neithei	or the	:se a	рріу іо	
Fur	ther information o	n acqu	iring a HI	MRC Tax	check co	de can b	e foun	d at:		
	os://www.gov.uk/g tal-licence#conter		e/comple	te-a-tax-c	heck-for-	a-taxi-pr	ivate-h	ire-or	-scrap-	
1110		110								
	All applicants MI	UST coi	mplete the	e followin	g declara	tion in re	lation t	to		
	convictions, war								1000	
	Offenders Act 19 Following a rulin									
	and reprimands, appropriate.	includi	ng those	referred t	o as 'spei	nt' where	it con	sider	S	

Applicants who have been resident in the UK for less than 5 years MUST provide a Certificate of Good Conduct from the country or countries where they have previously resided. Applicants who have been resident in the UK for more than 5 years MUST provide either a Certificate of Good Conduct from the country or countries where they previously resided *for a period of more than year*, or written reasons why this cannot be provided.

9.	Refer to 'Guidance Notes for New Applicant'. Group II Medical Report.  NOTE: Medicals will only be accepted from either your own GP or any other medical practitioner who has access to at least 2 years of your medical records.  Have you ever suffered or been treated for any medical condition which may be, or may become, likely to affect your fitness to drive a Hackney Carriage or Private Hire vehicle or may otherwise affect the efficient discharge of your duties as a licensed driver?								
	(Tick Box)	Yes		No					
	If <b>yes</b> , please provide details regarding the Medic	cal Condit	ion.						
	(Continue on a separate sheet if necessary)								

	-	_									
Please enter your Driving Licence number here:											
We need to view your online driving record and in order to do this we need you to supply us with a 'check code'											
You can get this check code from the .GOV website: www.gov.uk/view-driving-licence											
You will need your driving licence number, your national insurance number and your postcode in order to log into your details											
Please enter your <u>check code</u> here: (make sure there is a clear distinction between upper-case and lower-case letters)											

**Share your Driving Licence information** 

10.

Note: This code is CASE SENSITIVE and it is only valid for 21 days, and can only be used once.

If you have difficulties accessing this data online, you can apply for a check code by telephoning: **0300 083 0013** 

11 Incomplete applications will be rejected.

Please refer to the application guidance notes to ensure you have supplied all documents required.

## 12. <u>DECLARATION</u>

I have read and understood the application guidance, I consent to Lewes District Council to perform all necessary checks in connection with this application.

The information I have provided can be used for the purposes of licensing Hackney Carriage/ Private Hire drivers but may also be used for other Council purposes where it is permitted by law (Lewes District Council is registered under the Data Protection Act 2018 for these purposes).

I declare that to the best of my knowledge and belief the answers given above are true. If a licence is granted I undertake to comply with the conditions attached on the grant of the licence. Should I engage in other employment, I also agree to partake of sufficient rest and refreshment after finishing work before commencing driving for hire.

## **WARNING**

Applicants are advised that to make, knowingly or recklessly, a false statement or omit any information from this application is a criminal offence.

This Authority reserves the right to undertake all checks it considers necessary to determine whether an applicant is 'fit and proper'.

Lewes District Council takes its obligations under the Data Protection Act 2018 seriously and will not disclose personal information to any unauthorised person. The authority is under a duty to protect the public funds it administers and will not disclose personal information to any organisation outside the Council except where necessary for the prevention and detection of fraud or if required to do so by law.

The Council will use the personal information it collects to populate our Customer Relationship Management System (CRM). This system enables the Council to provide a more efficient and streamlined service to you.

The Council may share your information with, and obtain information about you from, other organisations to make sure the information held is accurate, to prevent or detect crime; and/ or to protect public funds. These other organisations may include other departments within the Council, Government Departments and/ or other Local Authorities.

Signature	Date