



**Legal, Licensing & Registration**  
Taxi and Private Hire Licensing  
225 York Road, Leeds, LS9 7RY  
Tel: 0113 2143366 Fax: 0113 2143369  
taxiprivatehire.licensing@leeds.gov.uk

PLATE NO. ....

**REQUISITION FOR A HACKNEY CARRIAGE/ PRIVATE HIRE VEHICLE LICENCE**

**PRINCIPAL APPLICANT**

Surname..... Forename(s).....

Address.....  
.....

Post Code..... Telephone No..... Date of Birth.....

**APPLICANT 2**

Surname..... Forename(s).....

Address.....  
.....

Post Code..... Telephone No..... Date of Birth.....

I/ We, being the owner(s) of a mechanically driven vehicle constructed to carry .....  
persons, do hereby apply for such vehicle to be licensed as a Private Hire/ Hackney  
Carriage Vehicle.

Given under my hand this ..... day of .....

Signature 1.....

Signature 2.....

**Public funds must be protected and so the information you have provided on this form may be used  
to prevent and detect fraud. The information may also be shared, for the same purposes, with other  
organisations which handle public funds.**

**THIS FORM, WHEN COMPLETED, SHOULD BE RETURNED TO TAXI AND PRIVATE  
HIRE LICENSING AT THE ABOVE ADDRESS BY THE APPLICANT(S) IN PERSON  
TOGETHER WITH THE VEHICLE REGISTRATION DOCUMENT (V5) AND/OR BILL OF  
SALE. THE CURRENT LICENCE HEED IS ALSO PAYABLE ON APPLICATION.**

**FOR OFFICIAL USE ONLY**

**PLATE No.** .....

**VEHICLE DETAILS**

Registration Mark..... Date 1<sup>st</sup> Registered.....

Make..... Model.....

Engine Capacity.....cc Fuel Type.....

Type of Body..... Seats..... Colour.....

Approved vehicle?..... No. of Wheelchairs (if applicable).....

**INSURANCE DETAILS**

Insured by..... Cert of Ins/ Cover Note No.....

Insured from..... To.....

Cover for Public/ Private Hire?..... Checked by..... Date.....

**MOT DETAILS**

Certificate No..... Issue Date..... Expiry Date..... Mileage.....

**THIS SECTION MUST BE COMPLETED BY THE LICENSED OPERATOR WHO INTEND TO OPERATE PRIVATE HIRE**

Operator..... Licence No.....

Surname..... Forename.....

**THIS SECTION MUST BE COMPLETED BY A DIRECTOR OF THE ASSOCIATION (HACKNEY CARRIAGE)**

Public Hire Association.....

Surname..... Forename.....

Fee paid?.....  
Cash/ Cheque

Receipt No.....

Date issued.....

**LICENCE**

Date of Issue.....

Date of Expiry.....

Issued by.....

**COMPUTER RECORDS AMENDED**

PLATES/ LIC SURRENDERED Date..... Recd by..... Receipt No....