Operator Renewal Application

Name		
Address		
		•
		•
Post code		



Elections and Regulatory Service

Taxi and Private Hire Licensing 225 York Road Leeds LS9 7RY

Tel: 0113 3781570

taxiprivatehire.licensing@leeds.gov.uk

Operator I icanas No.	Expiry Date
Operator Licence No:	Expiry Date

In order to apply for a new licence you must attend **in person** at the above address between 8am and 3.30pm Monday to Thursday or Friday 8am to 3pm.

The office is closed every 3rd Tuesday of the month for staff training from 8am to 10am.

INFORMATION NOTES

- Please use this form if you would like to apply to renew your vehicle licence
- You can renew your licence up to 6 weeks prior to the expiry of your current licence
- Please complete in block capital letters using black ink

If you have any problems completing this form in full please contact the licensing office for assistance

Licensing Officers are **not** permitted to complete or amend forms on behalf of applicants for legal reasons.

In order to complete your renewal you must bring with you;

- a completed renewal application
- current planning consent
- current Private Hire Operator Licence
- certificate of Employers and Public Liability Insurance
- vour schedule of Vehicles and Drivers
- DTI certificate
- the applicable fee payable by cash, debit card or cheque (made payable to Leeds City Council with banker's card)

Leeds City Council will only renew your licence providing it is satisfied that you are a fit and proper person to hold a licence.

Failure to renew this licence by the above date may result in having to begin a new application process.

Booking an appointment avoids the queues

You can book an appointment to avoid the queues, simply email us at taxiprivatehire.licensing@leeds.gov.uk stating your name, address, date of birth, licence number, transaction type and your preferred date and time and we will email you back with the closest available appointment.

Full Details of Applicant				
To be completed in block capital letters , one letter in each box only, in black ink .				
Mr Mrs Miss Or write in title				
1. Surname				
2. First Name				
3. Previous Names or Alias				
5. Are there any changes to your residential address since the renewal of your last licen Yes No If yes, please complete a change of details for				
6. Telephone Number (Home) (Mobile)	Oilli			
7. Email Address				
Convictions / Cautions/ Associated Incidents				
 You are required to declare any of the matters listed below that have occurred since the renewal of your last licence so that the Council can assess your suitability to be re-licensed; (a) any conviction (criminal or driving matter) (b) any caution (issued by the Police or any other agency) (c) issue of any Magistrate's Court summons (d) issue of any fixed penalty notice for any matter (e) any harassment or other form of warning or order within the criminal law including Anti-Social Behaviour Orders or similar (f) any arrest for any offence (whether or not charged) 				
If you have not received any convictions please sign here to confirm:				
Date of Offence Date of Conviction Offence Committed Court Attended	ed Sentence Received			
9. Do you have any objections to authorising the Council to obtain further information relating to the above from the Police or partner agencies? Yes No				

Details of a Partnership					
1.	Are there any Yes	changes in persons having No	g an interest in the renewa	al of the Operator licence?	
1a.	If Yes, please give details; Added Removed				
	Mr	Mrs Miss	Or write in	title	
	Surname				
	First Name				
	Previous Nam	nes or Alias			
	Current Home	e Address (House Number/	Street Name)		
	District				
	City				
If you	Post Code				
2.	2. Are any convictions recorded against this partner? Yes No				
2a.	2a. If Yes, please give details;				
Da	ate of Offence	Date of Conviction	Offence Committed	Court Attended	Sentence Received
3.		er engaged in any trade or	business activities before	seeking this application?	
	Yes	No			

Business Activity				Dates: from and to		
			ļ			
			ļ			
			ļ			
4.	Has the partne	er made a previous app	lication for an	Operator licence?		
	Yes	☐ No		•		
4a.	If Yes, please	give details;				
	Local Authority	Operator	Number	Dates Held	Expiry Date	
	Local Additionity	Орегатог	itanibei	Dates field	Expiry Date	
5.	Has the partner	er ever had an Operato	r licence refus	ed/ revoked/ suspended by Le	eds City Council or any othe	
	Local Authority Yes	/ <i>!</i>				
5a.	If Yes, please	give details;				
	cal Authority	Type of Licence		Refused/ Revoked/ Susp	anded Detail	
LU	cal Admonty	Type of Licence		Refused/ Nevoked/ Sus	Delided Detail	

Operator Base Details 1. **Trading Name** Address of Booking Office 2. 3. District 4. City 5. Post Code 6. Business Telephone Number 7. Fax Number 8. **Email Address** Has the booking office address changed in the last 12 months? 9. Yes No If yes, please state the previous address of Booking Office 9a. District City Post Code 10. Has the necessary planning permission been obtained? No 11. DTI Licence No. 12. Frequency

Applicant Declaration

I apply for renewal of my operator licence and I declare that the answers to all questions are true to the best of my knowledge and belief. I agree to abide by the rules of Leeds City Council's licensing conditions.

It is an offence for the person completing this form to make a false statement or omit relevant details. False and/ or misleading information in this declaration may render this application invalid and may also result in prosecution.

Applicants Signature:	Date:		
PRIVA	CY NOTICE		
Government (Miscellaneous Provisions) Act 1976. This is as part of our public tas	a statutory duty to collect and process this information to be compliant with the Local sk obligations as a Local Authority to ensure whether a person is 'fit & proper' to hold a process this information on medical shocks.		
taxi and/ or private hire licence. This also includes processing information on medical checks, DBS checks and DVLA checks. If necessary, the Council may pass your details to the Home Office in order to make further enquiries regarding your immigration status and right to work in the UK. In addition, the Home Office may request that we supply them with copies of your documentation in relation to immigration and right to work enquiries. Applicants who cannot produce the necessary evidence should be aware that their details may be passed to the Home Office and that the Home Office may also pass your details to other Government bodies such as the DVLA in relation to immigration matters.			
We may also share information with other third parties wh	here required by law for the detection and prevention of crime.		
surrender or revocation of your final licence, in line with our retention policy (excep	rom the date of receipt, after which it will be securely destroyed 6 years after the expiry, it in the event of an appeal or judicial inquiry, in which case it will be retained for as long		
The Council's corporate privacy notice, which includes details of the au	etermine these matters). uthority's Data Protection Officer and your Information Rights is available at:		
https://www.leeds.gov.uk/p	vrivacy-statement/privacy-notice		
For Office Use Only			
The details in this box are to be completed by authorised s	taff only.		
Licensing Staff – please ensure that a licence is not issued authorised officers.	d until all checks have been completed and signed by		
Operator Number:			
Licence Issued? Yes No			
Fee Paid? Yes No			
£			
Cash Cheque Debit Card			
Receipt No:			
Name			
Signature	Date:		
Date permit issued:	Expiry Date:		