

The Licensing Team Environmental Health & Housing North Devon Council POBOX 379, Barnstaple, Devon, EX32 2GR

Contact Details:
Tel: 01271 388870
Fax: 01271 388328
Email: licensing@northdevon.gov.uk
Web:www.northdevon.gov.uk/licensing

APPLICATION TO TRANSFER THE VEHICLE OWNERSHIP OF A LICENCED HACKNEY CARRIAGE

Form Ref: V/HT1

Data Protection

North Devon Council is the Data Controller.

Your personal information will be held and used in accordance with the requirements of the Data Protection Act 1998. We will use the information you have provided in connection with the administration of Licensing.

We may lawfully disclose information to other public sector agencies to:

- prevent or detect fraud and any other crime;
- support national fraud initiatives;
- protect public funds;
- progress your request for service.

We may also use basic information about you, e.g name and address, in other areas of service provision at North Devon Council if this:

- helps you to access our services more easily;
- promotes the more efficient and cost-effective delivery of services;
- helps us to recover monies that you owe us.

We will not use your personal information in a way that may cause you unwarranted detriment.

For further information regarding the National Fraud Initiative, please visit the Council's website – www.northdevon.gov.uk/fairprocessingnotice

If you require this document in an alternative format, please contact us.

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant questions). You may wish to keep a copy of the completed form for your records.

APPLICATION TO TRANSFER THE VEHICLE OWNERSHIP OF A LICENCED HACKNEY CARRIAGE

TOWN POLICE CLAUSES ACT 1847 AND 1889, PUBLIC HEALTH ACT 1975 AND LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1976

Part 1 – Details of Transferee (new licence holder)			
1. Title: Mr Mrs Miss Ms Or Other (please specify)			
Surname:			
Other name(s):			
2. Home Address:			
Postcode:			
3. Telephone:	Daytime:		
	Mobile:		
	Evening:		
4. Email Address:			
[please give as many contact details as possible in case we need to contact you]			

I DO HEREBY make application for the transfer of the following Hackney Carrige Vehicle with licence to be used for standing and plying for hire within the said District according to the provisions of the Town Police Clauses Act 1837 and 1889, The Public Health Act 1975, Local Government (Miscellaneous Provisions) Act 1976 and Bylaws having effect within the said District with respect to Hackney Carriages.

Part 2 – Description of Vehicle		
5. Make of Vehicle (e.g. Ford):		
6. Model of Vehicle (e.g. Mondeo):		
7. Registration Number of Vehicle:		
8. Engine Capacity:		
9. Seating Capacity (excluding driver):		
10. Date of first registration:		
11. Licence Number:		
12. Type of Vehicle (e.g. Saloon):		

I understand that the vehicle transferred to me or any other Hackney Carriage Vehicle in the ownership of me must not be sold, leased or otherwise disposed of within a period of twelve months from the date of transfer, unless the Hackney Carriage licence transferred in respect of that vehicle shall have been first surrendered to the Council.

	nsferee (new licence holder)	
ů ·	erson applying to have Hackney Carriage Vehicle licensed in their	
name):		
Signature:		
Date:		
[Where the application is to	o be submitted in an electronic form, the signature should be	
generated electronically ar	nd should be a copy of the person's written signature.]	
Part 4 – Other Concerned	d Person	
	f any person who is concerned, either solely or in	
	er person in the keeping, employing or letting or hire of the	
vehicle.	5 pro 1 2 pro 1 pr	
13. Title: Mr Mrs M	liss Ms Dr Other (please specify)	
Surname:	Inc Dr Care (produce opecary)	
Other name(s):		
14. Home Address:		
14. Home Address.		
Postcode:		
15. Telephone:		
16. How Concerned:		
I DO HEREBY agree to the above mentioned application for transfer of the above		
Hackney Carriage.		
Cianatura		
Signature:		
Date		
Date:		
N.B. The new licence will be issued in the name(s) of the proprietor(s) of the vehicle, listed		
above.		
	eror (existing licence holder)	
17. Title: Mr Mrs Miss Ms Dr Other (please specify)		
Surname:		
Other name(s):		
18. Home Address:		
Postcode:		
19. Telephone:		

Part 6 – Signature of Transferor (existing licence holder)		
I DO HEREBY agree to the above mentioned application for transfer of the above Hackney		
Carriage:		
Carriage.		
Signatura		
Signature:		
D. C.		
Date:		
[Where the application is to be submitted in an electronic form, the signature should be		
generated electronically and should be a copy of the person's written signature.]		
Part 7 – Current Joint Proprietor		
Please list below the name and address of every other person who is currently a joint		
proprietor of the vehicle, or is concerned, either solely or in partnership with any other		
person in the keeping, employing, letting or hire of the Hackney Carriage Vehicle:		
20. Title: Mr Mrs Miss Ms Dr Other (please specify)		
Surname:		
Other name(s):		
21. Home Address:		
Postcode:		
22. Telephone:		
23. How Concerned:		
I DO HEREBY agree to the above mentioned application for transfer of the above		
Hackney Carriage.		
Signature:		
Signature.		
Data		
Date:		
[continue on a separate sheet if necessary]		
Part 8 – Declaration and Checklist (please tick)		
I/We* enclose the appropriate fee (cheques should be made payable to North Devon		
Council), being the amount of the fee payable on this application		
Insurance certificate or cover note		

^{*} Delete or select as appropriate.