

Trade Associations

Are you a member of a private hire trade association (Y/N)

If YES. Do you consent to the Trade Association communicating with Isle of Wight Council on your behalf (Y/N)

Name of trade association

DECLARATION

I/We wish to apply for a Private Hire Vehicle Licence. I declare that I have checked the information given on this application form and to the best of my knowledge and belief it is correct. I understand that a false or misleading statement, or that withholding relevant information, may result in the refusal or revocation of the licence and/or may render me liable to prosecution.

Signature of each applicant

1.
2.
3.

Name

Date

If you need to contact the

Address

Isle of Wight Council
Licensing Section
Jubilee Stores
The Quay
Newport
Isle of Wight

Telephone number

Tel: (01983) 823159

Website and e-mail address

Website: www.iwight.com
E-mail: licensing@iow.gov.uk

Opening Times

8.30am-5.00pm Monday to Thursday
8.30am-4.30pm Friday
Closed Saturday and Sunday

Please insert your email address below

Application for the (Grant) (Renewal) (Transfer) of a Private Hire Vehicle Licence

Please Read the Guidance Notes and Conditions for this licence before completing and submitting the application form.

The Grant or renewal of a licence is not automatic and each application will be considered on its individual merits having regard to the Isle of Wight Council Conditions and Convictions Policy.

Legal Requirement

The Isle of Wight Council is the data controller for the personal information you provide on this form. The council's Data Protection Officer can be contacted at dpo@iow.gov.uk. You can contact the council by phone on 01983 821000, or by writing to us at County Hall, High Street, Newport, IW PO30 1UD.

Your information will be used to allow the Council to process your application. In accordance with Data Protection law, the legal basis for this is for the performance of a task carried out in exercise of official authority. Your information will be shared with other council departments relevant external bodies for the purposes of processing your application.

We will keep your personal data for 6 years *or* as long as we are required to do so under relevant legislation or in accordance with our operational requirements. You can view our retention schedule on our website www.iwight.com.

For further details on how your information is used; how we maintain the security of your information; and your rights, including how to access information we hold on you, and how to complain if you have any concerns about how your personal details are processed, please visit www.iwight.com or email dpo@iow.gov.uk

**PLEASE ANSWER ALL
QUESTIONS AND WRITE IN
BLOCK CAPITALS**

APPLICATION

Name of applicant (Owner of Vehicle)

Mr/Mrs/Miss/Other (state)	<input type="text"/>
Surname	<input type="text"/>
Forename	<input type="text"/>
Date of Birth (DD/MM/YYYY)	<input type="text"/>

Address of applicant

<input type="text"/>	
<input type="text"/>	
Post Code	<input type="text"/>
Telephone	<input type="text"/>
Name of Business	<input type="text"/>
Are you the sole proprietor	<input type="text"/>

If NO state full names and addresses of any other persons who are also proprietors of the vehicle or are concerned in the keeping, employing or letting of the vehicle.

Name of 2nd applicant (Owner of Vehicle)

Mr/Mrs/Miss/Other (state)	<input type="text"/>
Surname	<input type="text"/>
Forename	<input type="text"/>
Date of Birth (DD/MM/YYYY)	<input type="text"/>

Address of 2nd applicant

<input type="text"/>	
<input type="text"/>	
Post Code	<input type="text"/>
Telephone	<input type="text"/>

Name of 3rd applicant (Owner of Vehicle)

Mr/Mrs/Miss/Other (state)	<input type="text"/>
Surname	<input type="text"/>
Forename	<input type="text"/>
Date of Birth (DD/MM/YYYY)	<input type="text"/>

Address of 3rd applicant

<input type="text"/>	
<input type="text"/>	
Post Code	<input type="text"/>
Telephone	<input type="text"/>

DETAILS OF THE VEHICLE

Make	<input type="text"/>
Model	<input type="text"/>
Engine Size (CC)	<input type="text"/>
Colour	<input type="text"/>
Registration Number	<input type="text"/>
Date first registered	<input type="text"/>
Fuel Type	<input type="text"/>

INSURANCE DETAILS

Insurance Company Name	<input type="text"/>
Policy/Cover Note Number	<input type="text"/>
Insurance End Date	<input type="text"/>
Annual Premium	<input type="text"/>

Licence Type

Is the application for a grant, renewal or transfer of a licence?	<input type="text"/>
---	----------------------

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

For further information, see www.iwight.com/nfi to view the Level 2 notice.