



Cyngor Bwrdeistref Sirol
MERTHYR TUDFUL
MERTHYR TYDFIL
County Borough Council

HACKNEY CARRIAGE/PRIVATE HIRE VEHICLE LICENCE

Please complete this form in block capitals and enter ticks where appropriate. **Please note this form will NOT be processed unless ALL sections below are completed.**

Mae'r ffurflen hon hefyd ar gael yn Gymraeg / This form is also available in Welsh

1. Application Type

Hackney Carriage	<input type="checkbox"/>	Private Hire	<input type="checkbox"/>
New Application	<input type="checkbox"/>		
Renewal Application	<input type="checkbox"/>	Plate No:	Insert plate no

2. Applicant's Details

Please check whether you are applying as:

An individual	<input type="checkbox"/>
A limited company	<input type="checkbox"/>

Applicant's Full Name/Company Name:			
Applicant's Address(Registered address if a Ltd company):			
Post Code:			
Landline Number		Mobile Number	
Email:			

3. Vehicle Details

Registration Number:	
Date of first registration:	Insert date

Date of manufacture	Insert date		
Current Mileage			
Vehicle Make		Vehicle Model:	
Colour:		No. passenger seats:	

Is the vehicle wheelchair accessible?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Does the vehicle have an automated wheelchair lift?	Yes <input type="checkbox"/> No <input type="checkbox"/>

4. Registered Keeper of the Vehicle

(Please state "as above" if it is the same as the licence holder)

Full name and Address:	
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5. Interested Parties

Any person connected to the vehicle, including the driver and anyone hiring the vehicle must be listed here. Add additional pages if necessary.

Full name(s) and Address(es):	
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6. Vehicle Insurance Details

A copy of the vehicle insurance certificate must be submitted with this application.

Name and address of insurance company:	
Policy Reference No:	Insert Ref No.
Insurance expiry date:	Insert Expiry Date.

7. Declaration

- A. The vehicle is insured from the date of the new licence
- B. I am aware that if my vehicle is wheelchair accessible, it will be included on a list of designated vehicles under the Equality Act 2010 which will be published on the

Council website. I am aware if I wish to appeal this vehicle being placed on the list, I can appeal under S172(4) of the Equality Act 2010, within 28 days of being placed on the list.

- C. I understand that if I knowingly or recklessly make a false statement or omit any material particular in giving the information required for this application, I may be liable to prosecution under Section 57 of the Local Government (Miscellaneous Provisions) Act, 1976.
- D. I can confirm the vehicle is not already licensed as a hackney carriage/private hire vehicle by another Council.
- E. I have read the conditions which will be attached to the licence and agree that I will comply with them in the event of my application being successful and the licence being granted.
- F. For Hackney Carriage vehicle applications only - I certify that the vehicle will be operated in accordance with MTCBC's Intended Use Policy.

Signature:	Date:	DD/MM/YYYY
Print Full Name:		
Capacity in limited company:		

Application Checklist

A checklist of the requirements is provided for your reference below; for further information regarding any of these criteria, please review the Taxi Licensing Policy

Completed Application Form	<input type="checkbox"/>
Fee	<input type="checkbox"/>
Insurance Certificate (and schedule if applicable)	<input type="checkbox"/>
V5C Vehicle Registration Document	<input type="checkbox"/>
Valid MOT Certificate	<input type="checkbox"/>
Inspection Check Certificate	<input type="checkbox"/>