# **Vehicle (Plate) Grant Application**

**SECTION 1 Licence requirements**

|  |  |
| --- | --- |
| 1. What type of licence are you applying for:
 | Choose an item. |

**SECTION 2 Applicant details**

|  |  |
| --- | --- |
| 2.1 Title:Surname:Forenames:Please state any other names you have previously been known by:I am 18 years old or over (please tick):Date of Birth:Badge number:National Insurance number: | Choose an item.If ‘other’ please state: Enter ‘other’ titleEnter SurnameEnter ForenamesEnter previous names[ ] Click or tap to enter a date. Enter badge numberEnter National Insurance number |
| 2.2 **Address:**First line of address:Line 2:Line 3:Town/City:Postcode: |  Enter first line of addressEnter address line 2Enter address line 3Enter Town/CityEnter postcode |
| 2.3 **Contact Details:** (This will be the number we will call to make payment so you must have access to this number during office hours)Telephone number:Mobile number: | Enter telephone numberEnter mobile number |
| 2.4 Email address: (This is how we will contact you if we need to check or send any documents) | Enter email address |

**SECTION 3 Operator details**

|  |  |
| --- | --- |
| 3.1 Name of Private Hire Operator and Call Sign:Name:Call Sign: | Enter Private Hire Operator name Enter Call Sign |

**SECTION 4 Vehicle details**

|  |  |
| --- | --- |
| 4.1 Registration number:Vehicle make (manufacturer):Vehicle model:Body type:Colour:Chassis number:Number of seats (excluding driver):Date of first registration: | Enter vehicle registration numberEnter vehicle makeEnter vehicle modelEnter vehicle body typeEnter vehicle colourEnter chassis numberEnter number of seatsClick or tap to enter a date.  |

**SECTION 5 Vehicle owner / user**

|  |  |
| --- | --- |
| 5.1 Is the vehicle registered in your own name: | Choose an item.If ‘no’, please provide details:Enter details |
| 5.2 Is the vehicle owned by a limited company: | Choose an item.If ‘yes’, please provide details:Enter details |
| 5.3 Is the vehicle licensed by any other authority: | Choose an item.If ‘yes’, please provide details:Enter details(If yes you will need to surrender this licence and bring in proof of this before it can be licensed) |

|  |  |
| --- | --- |
| 5.4 Will the vehicle be used by any other driver:Name:Address:Badge number:Name:Address:Badge number:Name:Address:Badge number: | Choose an item.If ‘yes’, please provide details: (Please continue a separate page if necessary and submit with your application)Enter driver nameEnter driver addressEnter driver badge numberEnter driver nameEnter driver addressEnter driver badge numberEnter driver nameEnter driver addressEnter driver badge number |
| 5.5 Will the vehicle be kept at your home address: | Choose an item.If ‘no’, please provide location:Enter location/address |
| 5.6 Do you have any other vehicles licensed in your name: Name of Council:Plate number:Name of Council:Plate number:Name of Council:Plate number: | Choose an item.If ‘yes’, please provide details: (Please continue a separate page if necessary and submit with your application)Enter Council nameEnter vehicle plate numberEnter Council nameEnter vehicle plate numberEnter Council nameEnter vehicle plate number |

**SECTION 6 Checklist**

|  |  |
| --- | --- |
| 6.1 **I confirm that I have uploaded / attached the following documents required with my application:** - Insurance certificate:- Log book V5 / V55:- MOT and inspection sheet:- Operators form:- Certificate of conformity for new Hackney Carriage Vehicles- Meter test certificate (if applicable) | **(Please tick yes)**[ ] [ ] [ ] [ ] [ ] [ ]  |

**SECTION 7 Declaration**

|  |
| --- |
| **Please read the following declaration carefully, DO NOT submit this form if any part of the following declaration is not true.****By submitting this application form I confirm the information I have supplied above and, in any attachments, or additional documents supplied in support of this application, is true to the best of my knowledge and belief. I understand I may be prosecuted if I make a false statement or omit any relevant information in the completion of this application. I am the person named above and I have either completed the application myself or have satisfied myself the information submitted on my behalf is accurate.**[ ]  Ticking this box indicates you have read and understood the above declarationPrint Name: Enter full name Date: Click or tap to enter a date.***The information you provide is confidential and subject to the requirements of the Data Protection Act 2018. This personal data will be held and processed by Birmingham City Council for the purpose(s) of ensuring compliance with legislative requirements. The personal details you provide may also be shared as part of any statutory duties requiring such disclosures and to protect the public funds it collects and administers. Any data may be used to prevent fraud or the misuse of resources. For further information visit our*** [***privacy notice***](http://www.birmingham.gov.uk/privacy) ***page.*** |