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			
Licence Type			
Is the application for a grant or renewal of a licence?			
DECLARATION			
I/We wish to apply for a Private Hire Operator's 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			
Name			
Date			
Please insert your email address below			

Trade Associations

If you need to contact the Licensing Section

Address

Isle of Wight Council Licensing Section Jubilee Stores The Quay Newport Isle of Wight PO30 2EH

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



Application for the (Grant) (Renewal) of a Private Hire Operator's 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 <u>or</u> 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 <u>www.iwight.com</u>.

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 <a href="documents-documen

FN\/ 89

PLEASE ANSWER ALL **QUESTIONS AND WRITE IN BLOCK CAPITALS APPLICATION** Name of applicant (Operator) Mr/Mrs/Miss/Other (state) Surname Forename Date of Birth (DD/MM/YYYY) Home address of applicant Post Code Telephone Name of Business Are you the sole operator (Y/N)

If NO state full names and addresses of any other persons who are also applicants for this operator's licence.

Name of 2nd	d applicant	
Mr/Mrs/Miss/C	Other (state)	
Surname		
Forename		
Date of Birth (DD/MM/YYYY)	
Home address of 2nd applicant		
Post Code		
Telephone		
·		
Name of 3rd	d applicant	
Name of 3rd		
Mr/Mrs/Miss/C		
Mr/Mrs/Miss/C Surname Forename		
Mr/Mrs/Miss/C Surname Forename Date of Birth (Other (state)	
Mr/Mrs/Miss/C Surname Forename Date of Birth (Dther (state) DD/MM/YYYY)	
Mr/Mrs/Miss/C Surname Forename Date of Birth (Dther (state) DD/MM/YYYY)	
Mr/Mrs/Miss/C Surname Forename Date of Birth (Dther (state) DD/MM/YYYY)	

Operating Premises

Trading Name		
Operating Address		
Post Code		
Telephone		
email		
Company Details		
Company Deta	ails	
Company Deta Company Name	ails .	
	ails	
Company Name	ails	
Company Name Company Number	ails	
Company Name Company Number Directors Names		
Company Name Company Number Directors Names Secretary's Name		
Company Name Company Number Directors Names Secretary's Name		
Company Name Company Number Directors Names Secretary's Name		

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.