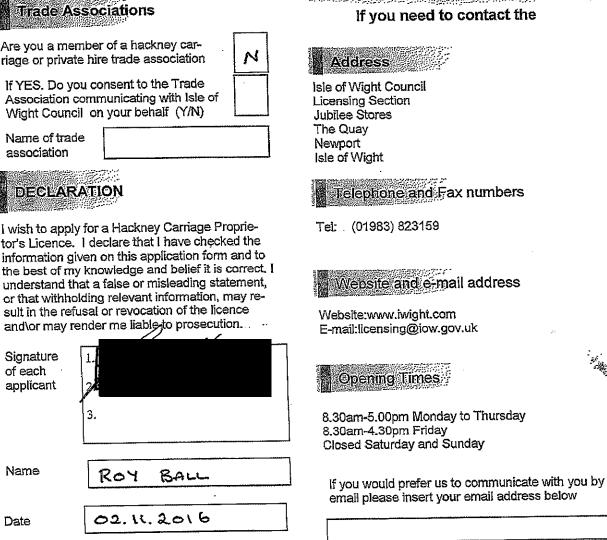
Are you a member of a hackney carriage or private hire trade association If YES. Do you consent to the Trade Association communicating with Isle of Wight Council on your behalf (Y/N) Name of trade association DECLARATION I wish to apply for a Hackney Carriage Proprietor's Licence. I declare that I have 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

: :





Application for the (Grant) (Renewal) (Transfer) of a Hackney Carriage Proprietor'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

This application may be monitored by the Isle of Wight Council for regulatory, quality control or crime detection purposes. Information from this application will be processed in accordance with the Data Protection Act 1998 for the purpose of processing your particular enquiry/request. The Isle of Wight Council ("the Council") is the data controller. By completing this form you consent to the Council contacting you by email or nominated contact method in relation to your enquiry/request.

The information contained in this application may, in exceptional circumstances, be subject to disclosure to third parties under either the Data Protection Act 1998 or the Freedom of Information Act 2000 to the extent the law allows and in accordance with the Isle of Wight Council's Access to Information Policy . Disclosure will only be made where in all the circumstances it would be fair to do so and in the public interest.

Please note that the Council may process your information in the absence of consent for the purpose of crime prevention or detection so far as is in accordance with the law.

The second of the second secon Name of 2nd applicant (Owner of Vehicle) PLEASE ANSWER ALL DETAILS OF THE VEHICLE **QUESTIONS AND WRITE IN** Mr/Mrs/Miss/Other (state) BLOCK CAPITALS: Make Surname PEUCEOT Forename APPLICATION Model SOOS SPORT HDI Date of Birth (DD/MM/YYYY) Engine Size (CC) Name of applicant (Owner of Vehicle) 1560 Address of 2nd applicant Colour SILVER Mr/Wrs/Miss/Other (state) Registration YC 60 A00 Surname BALL Number Post Code Date first registered Forename ROY 21.10.2010 Date of Birth (DD/MM/YYYY) Telephone Fuel Type DIESEL Address of applicant Name of 3rd applicant (Owner of Vehicle) INSURANCE DETAILS Mr/Mrs/Miss/Other (state) Surname Insurance Company BINSTEAD TFP Name Forename Post Code P033 Policy/Cover Note Date of Birth (DD/MM/YYYY) Number Telephone 01983 Address of 3rd applicant Insurance End Date 11.06.2017 Name of Business DIAMOND TAXIS Annual Premium Are you the sole proprietor (Y/N) Licence Type Post Code If NO state full names and addresses of any other Is the application for a grant. persons who are also proprietors of the vehicle or are concerned in the keeping, employing or letting of the renewal or transfer of a TRANSFER Telephone vehicle. licence? 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.

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.