

HACKNEY CARRIAGE/PRIVATE HIRE VEHICLE



TEMPORARY TRANSFER APPLICATION

This form must only be used for the transfer of a licence to a vehicle which is temporarily replacing a Hackney or Private Hire Vehicle whilst that vehicle is undergoing repairs following a road traffic incident or collision.

Name

Address

.....

Telephone numbers Home

Mobile

Single Status Drivers licence number

Email address

Application for a TEMPORARY LICENCE relating to:

Plate number Hackney Carriage Private Hire

CURRENT vehicle registration number

Vehicle provider:

Company Name

Address

.....

Telephone numbers Office

Mobile

Email address

REPLACEMENT VEHICLE DETAILS

1. Make
2. Model
3. Colour
4. Vehicle registration number
5. Number of passengers to be licensed
6. Do the vehicle specifications comply with the HC/PH vehicle conditions? Yes ☐ No ☐

Fully wheelchair accessible means the vehicle has been modified to allow a customer to be loaded and carried in their own wheelchair whilst properly secured.

7. Does the vehicle comply with the current Policy in defining a Fully Wheelchair Accessible vehicle?
Yes ☐ No ☐
8. If the answer is YES to Question 7 you must attach the Certificate of Conformity to this application. Therefore, is the required Certificate attached to this application?
Yes ☐ No ☐
9. Has this vehicle been “written off” by an Insurance Company?
Yes ☐ No ☐

If the answer to question 9 is YES please speak to the Licensing Section before proceeding any further with the application.

PLEASE NOTE THE FOLLOWING:

A CERTIFICATE OF CONFORMITY **MUST** BE PRODUCED – IF NOT PRODUCED THEN A LICENCE WILL NOT BE ISSUED.

UNLESS A FURTHER APPLICATION IS MADE THIS TRANSFER WILL LAST FOR A PERIOD OF 2 MONTHS ONLY.

WHEN THE TEMPORARY VEHICLE IS NO LONGER REQUIRED THE TEMPORARY LICENCE AND PLATES MUST BE RETURNED TO THE COUNCIL

ONCE THE VEHICLE HAS PASSED THE TEST AND THE APPLICATION IS FULLY COMPLETED IE WHEN ALL DOCUMENTATION HAS BEEN RECEIVED BY THE LICENSING SECTION, THE LICENCE AND PLATES WILL BE ISSUED – 24 HOURS FROM COMPLETION OF THE APPLICATION PROCESS.

DECLARATION – IMPORTANT PLEASE READ BEFORE SIGNING

I hereby declare:

1. I acknowledge that any details disclosed by me to the Council can be used by the Council and any Government Agency in the investigation of matters involving or related to this application.
2. The information provided in this application is true and accurate.

For your information the link to the privacy notices under the General Data Protection Regulations for Legal Services, Licensing Section is:

<https://www4.halton.gov.uk/Pages/councildemocracy/privacynotices.aspx>

SIGNATURES

Licence holder

Signature

Print name

Date

Representative of Insurance Company/vehicle provider

Signature

Print name

Date

FOR OFFICE USE ONLY

VEHICLE REGISTRATION DOCUMENT

Document reference number	Vehicle registration number
Name of registered keeper	Type & colour of vehicle
Date of first registration	Date keeper acquired vehicle
Engine capacity	

<u>INSURANCE DOCUMENT</u>	CERTIFICATE	☐	COVER NOTE	☐
Company			Policy/Certificate number	
Vehicle registration number			Name of policy holder	
Start date			Expiry date	
Persons insured to drive	Policy holder only	☐	Policy holder & following named drivers	☐

Use

<u>CERTIFICATE OF COMPLIANCE</u>	<u>CERTIFICATE OF CONFORMITY</u>
Serial number	Received ☐
Date of issue	Not applicable ☐
Expiry date	
Mileage	

FEE PAID

Date	Receipt number
Amount	Method of payment

ACCIDENT REPORT FORM RECEIVED	Yes	☐	No	☐
ORIGINAL PLATES HANDED IN	Yes	☐	No	☐