

**APPLICATION FOR A HACKNEY CARRIAGE VEHICLE PROPRIETOR'S LICENCE FOR THE COUNTY OF MONMOUTHSHIRE**  
LICENSING SECTION, MONMOUTHSHIRE COUNTY COUNCIL,  
ABERGAVENTNY COMMUNITY EDUCATION CENTRE, OLD  
HEREFORD ROAD, ABERGAVENTNY, NMOUTHSHIRE, NP7 6EL



**Local Government (Miscellaneous Provisions) Act 1976 Part II**

**ALL APPLICANTS ARE REQUIRED TO PRODUCE WITH THIS FORM:-**

- A valid Certificate or Policy of Insurance (original document only)
- The Vehicle Registration Document (Log Book) must be produced with this application form.
- The Certificate as to Fitness of Vehicle
- Calibration of meter Certificate
- The licence fee
- Intermediate test certificate from a Liquid Petroleum Gas Association (LGPA) approved UK vehicle Conversion Company, in the case of vehicles converted to run on LPG.

Surname of Applicant (BLOCK CAPITALS)(Mr/Mrs/Miss) \_\_\_\_\_

Forename(s) \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_ Tel No: \_\_\_\_\_

Name of Owner (if different from above) or other part owner \_\_\_\_\_

\_\_\_\_\_ Email : \_\_\_\_\_

**PARTICULARS OF VEHICLE: Plate Number Hackney Vehicle (HV \_\_\_\_\_)**

**Make :** \_\_\_\_\_ **Model:** \_\_\_\_\_

**Registration No:** \_\_\_\_\_ **Date of 1<sup>st</sup> Registration:** \_\_\_\_\_

**Engine Capacity:** \_\_\_\_\_ **Colour:** \_\_\_\_\_

**Seating Capacity (excluding driver):** \_\_\_\_\_ **Number of Doors:** \_\_\_\_\_

**Name of Company:** \_\_\_\_\_

**Is this vehicle Wheelchair Accessible? YES / NO** (please delete)

I/WE DECLARE THAT TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF, THE ANSWERS GIVEN ARE TRUE. IF A LICENCE IS GRANTED I/WE UNDERTAKE TO COMPLY WITH THE CONDITIONS ATTACHED TO THE GRANT OF THE LICENCE. I/WE CONFIRM THAT I/WE HAVE READ AND UNDERSAND THE CONDITIONS ATTACHED TO THE GRANTING OF THIS LICENCE.

DATE \_\_\_/\_\_\_/\_\_\_ Signature of Applicant \_\_\_\_\_

DATE \_\_\_/\_\_\_/\_\_\_ Signature of Applicant \_\_\_\_\_

**APPLICANTS ARE ADVISED THAT TO MAKE, KNOWINGLY OR RECKLESSLY, A FALSE STATEMENT OR OMIT ANY INFORMATION FROM THIS APPLICATION IS A CRIMINAL OFFENCE.**  
PLEASE NOTE: Monmouthshire County Council is under a duty to protect public funds it administers and to this end may use the information you have provided on this form within Monmouthshire County Council for the prevention and declaration of fraud. It may also share this information with other bodies administering or in receipt of public funds solely for these purposes.

Request for Information –  
Intended usage of a Hackney  
Carriage

Local Government (Miscellaneous  
Provisions) Act 1976, Section 57

Surname of Applicant (BLOCK CAPITALS)(Mr/Mrs/Miss) \_\_\_\_\_

Forename(s): \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_ Tel No: \_\_\_\_\_

**PARTICULARS OF VEHICLE**

Make: \_\_\_\_\_ Model: \_\_\_\_\_

Registration No: \_\_\_\_\_ Licence No: HV \_\_\_\_\_

Address where the vehicle is to be stored when not in use if different from above: \_\_\_\_\_

\_\_\_\_\_

**DECLARATION OF INTENDED USE OF HACKNEY CARRIAGE, if licensed**

Please indicate your intended use of the hackney carriage, if licensed, by answering the following questions and / or by providing any other relevant information (please attach additional information if necessary).

1. Do you intend to use the above vehicle, if licensed as a Hackney Carriage, to ply for hire within the area of the Council? **YES / NO**
2. Do you intend to use the above vehicle, if licensed as a Hackney Carriage, entirely or predominantly for Private Hire remotely from the area of the Council? **YES / NO**
3. Do you intend to use the above vehicle, if licensed as a Hackney Carriage, to carry fare paying passengers otherwise than as described in (1) and (2) above? **YES / NO**

**OTHER RELEVANT INFORMATION**

If you have answered "NO" to question (1) and/or "YES" to questions (2) and/or (3) above, there is a presumption that your application will be refused, unless you satisfy the Council that it may grant you a hackney carriage proprietors licence without undermining the purpose of the legislation. If you wish to seek to persuade the Council that it should grant a licence in these circumstances, please explain why you believe that to be the case in the space overleaf (please if necessary, attach additional sheets):-

My reason(s) is / are:

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PLEASE NOTE: The Council's Licensing Committee is, with specific exceptions, a public forum. Not all applications require consideration by the Committee. Where our processes, as defined by relevant legislation, policies and guidance, require your application for a licence/permit/consent to be considered by the Licensing Committee, the identifying details you provide in your application may appear on documents which are considered by the Committee and are therefore available to the public. The personal information you provide will be used only for purposes related to the assessment of your application and future management of any licence/permit/consent granted. If you believe there is a legitimate reason for non-publication of your personal data, please provide those reasons with your application so that they can be considered in advance of preparation of Committee papers

**Declaration**

- I declare that the contents of this form and any additional information are true.
- I know that if I have knowingly or recklessly made a false statement in connection with this application, I shall be liable to prosecution and/or any licence granted to me as a result of such a false statement may be suspended or revoked by the Council.

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**FOR COUNCIL USE ONLY**

Record of decision

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Officer: \_\_\_\_\_

Decision: Granted / Refused

My reason(s) for the above decision is/are:

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