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| **CIVIC GOVERNMENT (SCOTLAND) ACT 1982** | | | | | | | | | | | | Legal and Regulatory Support | | | |
| **Application for a Renewal of a Taxi Driver Licence** | | | | | | | | | | | | | | | |
| **1.** | **This application can only be applied for by an individual:** | | | | | | | | | | | | | | |
| (i) | Full Name: |  | | | | | | | | | |  | | | |
|  | | | | | | | | | |  | | | |
| (ii) | Home Address:  (Including full postcode) |  | | | | | | | | | | | | | |
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| (iii) | Email Address: |  | | | | | | | |  | | | | | |
| (iv) | Telephone Numbers: | Home: | | |  | | | Mobile: | | |  | | | | |
| (v) | Date of Birth | Day | | | Month | Year | | Place of Birth: | | |  | | | | |
|  | | |  |  | |
|  | | | | | | | | | | | | | | | |
| **2.** | The Rehabilitation of Offenders Act 1974 (Exclusions and Exemptions)(Scotland) Order 2013 (as amended) is relevant to this section. A recent amendment created a new category of ‘*protected convictions*’. These are minor historical (‘*spent*’) convictions; a conviction will only be “*protected*” if it is categorised as “*less serious*” and it meets one of the 3 criteria below:   * The sentence imposed was admonition or absolute discharge, or the discharge of the referral of a child’s case to a children’s hearing **OR** * The person was under 18 years of age at the time the offence was committed and at least 7 years 6 months have passed since the date of that conviction **OR** * The person was over 18 years of age at the time the offence was committed and at least 15 years have passed since the date of that conviction.\*   The new regime for historical offences is complex. If you are in any doubt as to whether a conviction should be declared you should seek independent legal advice. If you have no convictions, please write “**NONE**” in this section of the form.  **\**This is a simple summary of complex statutory provisions. While every effort has been made to ensure accuracy these notes are for general guidance only and do not constitute legal advice. It is the responsibility of applicants and licence holders to ensure that they comply with all relevant legislation.*** | | | | | | | | | | | | | YES / NO  (please delete as applicable) | |
|  | Name: | | | Date of Conviction: | | Convicting Court: | | | Details of Offence: | | | | | Sentence: | |
| 1. |  | | |  | |  | | |  | | | | |  | |
| 2. |  | | |  | |  | | |  | | | | |  | |
| 3. |  | | |  | |  | | |  | | | | |  | |
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| **3.** | **Other Licences:** | | | | | | | | | | | |  | | |
| (i) | Has or does the applicant previously held, or currently hold, any type of Local Authority Licence/s? If YES, please give the following details: | | | | | | | | | | | |  | | YES/NO  (delete as applicable) |
|  | Name: | | | Type of Licence: | | | Date Granted: | | Expiry Date: | | | | Issuing Authority: | | |
| 1. |  | | |  | | |  | |  | | | |  | | |
| 2. |  | | |  | | |  | |  | | | |  | | |
| 3. |  | | |  | | |  | |  | | | |  | | |
| (ii) | Has the applicant, ever applied for any type of Local Authority Licence/s and had their application refused? If YES, please give the following details: | | | | | | | | | | | | YES/NO  (delete as applicable) | | |
|  | Name: | | | Type of Licence: | | | Date of Application: | | Authority Name: | | | | Reason for Refusal: | | |
| 1. |  | | |  | | |  | |  | | | |  | | |
| 2. |  | | |  | | |  | |  | | | |  | | |
| 3. |  | | |  | | |  | |  | | | |  | | |
| **4.** | Does the applicant suffer from, or have any disability, allergy or other condition likely to affect their fitness to operate? | | | | | | | | | | | | | | YES/NO  (delete as applicable) |
|  | If YES, please give the following details:  **In particular, if you are diagnosed as having an aortic aneurysm and if you have an aortic aneurysm which is 5.5cms or greater in size.** | | | | | | | | | | | | | | |
|  | Name: | | Nature of Condition: | | | | | | | | | | | | |
| 1. |  | |  | | | | | | | | | | | | |
| 2. |  | |  | | | | | | | | | | | | |
| 3. |  | |  | | | | | | | | | | | | |

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| **5.** | **Activity/Premises Details:** | | | | | | | | |
|  | **NOTE – APPLICANTS AGED 65 YEARS AND OVER WHO ARE MAKING AN APPLICATION FOR A TAXI DRIVER’S LICENCE REQUIRES A GROUP 2 STANDARDS MEDICAL TO BE UNDERTAKEN BY A COUNCIL APPROVED PROVIDER.  YOU WILL REQUIRE TO TRAVEL TO A CENTRAL LOCATION FOR THIS TO BE UNDERTAKEN.  THE COST FOR THIS WILL NOW BE MET BY THE COUNCIL.  THE COUNCIL WILL NOT COVER ANY TRAVEL COSTS INCURRED.  SHOULD YOU REQUIRE AN APPOINTMENT PLEASE CONTACT THE LICENSING OFFICE.  IT SHOULD ALSO BE NOTED THAT SHOULD AN APPLICANT REACH THEIR 65TH BIRTHDAY DURING THE PERIOD OF THE LICENCE, CONTACT SHOULD BE MADE WITH THE LICENSING OFFICE TO ARRANGE A MEDICAL APPOINTMENT** | | | | | | | | |
|  | Does the applicant intend to work as a full time taxi driver | | | YES / NO  (delete as applicable) | If NO, Please give further details: | | |  | |
| How long have you held a full drivers licence authorising you to drive a motor car: | | | Years Months | | | | | |
|  | Name and Address of the licensed operator of the vehicle/s the applicant intends to drive: | | |  | | | | | |
|  | (Note this should be the name as featured on the licence) | | |  | | | | | |
|  | **Please state the expiry date and number of your existing taxi drivers licence** | | |  | | | | | |
|  | **Declaration and Information:**  **Schedule 23 to Finance Act 2011 (Data Gathering Powers) and Schedule 36 to Finance Act 2008 (Information and Inspection Powers), grant HMRC powers to obtain relevant information from third parties. This includes licensing bodies being required to provide information about licence**  **applicants.’**   * [**www.gov.uk/register-for-self-assessment**](https://www.gov.uk/register-for-self-assessment) * [**www.gov.uk/corporation-tax**](https://www.gov.uk/corporation-tax) * [**www.gov.uk/income-tax/how-you-pay-income-tax**](https://www.gov.uk/income-tax/how-you-pay-income-tax)   **Please provide the following:**   * tax check code issued within the last 120 days (if you do not have this please follow the link below)   <https://www.gov.uk/guidance/complete-a-tax-check-for-a-taxi-private-hire-or-scrap-metal-licence> | | | | | | | | | |
|  | I declare that the particulars given by me on this form are true and I hereby make application to Argyll and Bute Council for the grant of the licence applied for above. I understand that I, or any person who, in connection with the making of this application makes any statement which I/they know to be false or recklessly makes any statement which is false in a material particular shall be guilty of an offence and liable, on summary conviction, to a fine not exceeding £2500.00.  I also confirm that, if granted a licence, I will comply fully with the conditions of that licence and have, previous to lodging this application, made myself familiar with the terms of Argyll and Bute Councils’ standard conditions  pertaining to the licence.  I can confirm that I am aware of the content of HMRC guidance relating to my tax registration obligations. | | | | | | | | | |
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|  |  |  | | | | |  | | | |
|  | Signature of Applicant: |  |  | | |  | **Note – Please ensure your signature is within the marked box.** | | | |
|  |  |  | | | | |  | | | |
|  |  | | | | | | | | | |
|  | Date: | |  | | |  | | | | |
|  |  | | | | | | | | | |
| **Notes:** | | | | | | | | | | |
|  | **Any form lodged which has not been fully completed will be considered incompetent and returned to the applicant.** | | | | | | | | | |
|  | |  | | --- | | The completed form with the required supporting paperwork, as detailed over, must be lodged at one of the following locations:- | | Head of Legal and Regulatory Support, Argyll and Bute Council, Kilmory, Lochgilphed, PA31 8RT  Argyll and Bute Council Offices, Burnett Building, St John Street, Campbeltown, PA28 6BJ  Argyll and Bute Council Offices, Ellis Lodge, 5 Argyll Road, Dunoon, PA23 8ES  Argyll and Bute Council Offices, Municipal Building, Albany Street, Oban, PA34 4AW  Argyll and Bute Council Offices, Breadalbane Street, Tobermory, Isle of Mull, PA75 6PX  Argyll and Bute Council Offices, Eaglesham House, Mountpleasant Road, Rothesay, Isle of Bute, PA20 0HQ  Argyll and Bute Council Offices, Jamieson Street, Bowmore, Isle of Islay, PA43 7HP  The Helensburgh and Lomond Civic Centre, 38 East Clyde Street, Helensburgh, G84 7PG |   Or emailed to; [licensing@argyll-bute.gov.uk](mailto:licensing@argyll-bute.gov.uk)  Payment can be made by **cheque** payable to Argyll and Bute Council or bank transfer to the following;  **Argyll and Bute Income Account**  **Sort Code 82-66-11**  **Account no. 2000 0542**  Card payments will also be accepted by phoning the number at the top of the lette | | | | | | | | | |
| 3. | Please note that the Council may consider the application at a public meeting if there is a valid objection/representation made to the granting of a licence. A hearing of the PPSL Committee will be heard to determine whether the licence should be granted. If there is to be a hearing the applicant will be notified and will be invited to attend. | | | | | | | | | |
| 4. The information you have supplied on this form will be used for the purpose for which you have provided it and  any relevant procedures following from this.  A full privacy notice, which provides information about your rights under data  protection legislation and details about what will happen to your personal data, is attached for your information.  **Schedule 23 to Finance Act 2011 (Data Gathering Powers) and Schedule 36 to Finance Act 2008 (Information and Inspection Powers), grant HMRC powers to obtain relevant information from third parties. This includes licensing bodies being required to provide information about licence**  **applicants.’**  **Supporting Documentation:**  **The following supporting documentation along with the appropriate fee MUST be lodged with the form otherwise the application will be considered incompetent and returned:** | | | | | | | | | | |
| The fee of £113.00 (cheques should be made payable to Argyll and Bute Council);  Driving Licence: (Card and a copy of DVLA driver summary record)  1 passport style and size photograph;  Medical Certificate (if applicable);.  HMRC tax check code  **Proof of entitlement to work and previous convictions (if applicable).**  **Please provide identification from List A, from the link below to support your application** | | | | | | | | |  | |

**UNDERNOTE REFERRED TO IN SUPPORTING DOCUMENTATION:-**

Your right to work in the UK will be checked as part of your licence application and this could include the licensing authority checking your immigration status with the Home Office. You must therefore provide a document or document combination that is stipulated as being suitable for this check. The list of documents is set out at <https://www.argyll-bute.gov.uk/sites/default/files/annex_a.pdf> You must provide the original document(s), such as a passport or biometric residence permit as indicated in the published guidance, so that the check can take place. The document will be checked in your presence. The document(s) will be copied and the copy retained by the licensing authority. The original document will be returned to you. Your application will not be considered valid until all the necessary information and original document(s) have been produced and the relevant fee has been paid.

If there are restrictions on the length of time you may work in the UK, your licence will not be issued for any longer than this period. In such circumstances the check will be repeated each time you apply to renew or extend your licence. If, during this period, you are disqualified from holding a licence because you have not complied with the UK’s immigration laws, your licence will cease to have effect and you must return it to the licensing authority. Failure to do so is a criminal offence.