

APPLICATION FOR A DRIVERS LICENCE



Town Police Clauses Act 1847 and Local Government (Miscellaneous Provisions) Act 1976

New		Renewal	
Existing Licence Number			
.....			

Private Hire	
Hackney Carriage	
Combined	

3 YEAR		1 YEAR	
Existing Licence Expiry Date			
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Weymouth & Portland		North Dorset		West Dorset		East Dorset		Purbeck	
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Full NAMES of Applicant	
ADDRESS including POSTCODE	
TELEPHONE Numbers:	Home <input type="text"/> Mobile <input type="text"/>
EMAIL Address:	<input type="text"/>
Date of Birth:	<input type="text"/> National Insurance No: <input type="text"/>
Tax Reference No:	<input type="text"/>
Have you held a full UK/EU motor car driving licence for at least 12 months?	YES / NO
What is the online DVLA code for checking your driving licence	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Please detail any current endorsements on your driving licence	<input type="text"/>
Do you have the right to work in the UK?	YES / NO
Have you lived in the UK for the last 5 Years?	YES / NO
Have you ever been refused any application for a driver's licence or had a driver's licence suspended or revoked, from this or any other Council? If 'Yes' give details as to which Council, what grounds and the date:	YES / NO
Have you ever been charged or convicted of any criminal offence? If so, please give full details, including the date of the offence, the date the matter was dealt with by the Court, the name of the Court, the sentence, and any other information	YES / NO

Have you since your last medical examination suffered from epilepsy, diabetes or sudden attacks of disabling giddiness or fainting, or from any disease, mental or physical, or from any injury or disability likely to interfere with the efficient discharge of your duties as a licensed driver or to cause the driving by you of a licensed vehicle to be the source of danger to the public? If 'Yes' please give details.	YES / NO
Since your last medical, have any of your medical requirements changed? (i.e. diabetes control has changed) If 'Yes' please give details	YES / NO

I have provided my driving licence	
I have provided a medical certificate completed by my registered GP with access to medical records	
I am aware I must complete a DBS check (Update service certificate Number)	
I am aware I must complete a DVLA check	
I have provided Dorset Council approved Safeguarding certificate	

I hereby declare all answers given are true and if a licence is granted I shall comply with the conditions attached on the grant of the licence and/or the hackney carriage/private hire laws and byelaws.

It is an offence for any person knowingly or recklessly to make a false statement or omit any material particular in giving information – Section 57 Local Government (Miscellaneous Provisions) Act 1976. Upon conviction a fine of up to Level 3 on the Standard Scale may be imposed.

Refunds are not available in the event of the surrender of any licence.

Date: Signature of Applicant

Return to Licensing,
County Hall, Colliton Park, Dorchester, Dorset, DT1 1XJ or licensing@dorsetcouncil.gov.uk

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 the Audit Commission website.

A copy of the Council's Privacy Policy can be found at [Taxi and private hire driver's licence - Dorset Council](#)

Medical		DBS Check Result		Driving Licence	
Driving Assessment		Knowledge Test		DVLA Check	
Safeguarding Training		Immigration Check		HMRC Tax Reference	
Application Fee		Photo		Operator verification	