



Change of Hackney Carriage/Private Hire Vehicle Registration Number

Town Police Clauses Act 1847
Local Government (Miscellaneous Provisions) Act 1976
Rother District Council Byelaws and Licence Conditions

Environmental Health and Licensing

Licence Plate No: Expiry Date:

INFORMATION NOTES – Please complete in BLOCK CAPITALS and use black ink

Please note that if you give misleading or untruthful information on this form it is a criminal offence under section 57(3) of the Local Government (Miscellaneous Provisions) Act 1976.

I, the undersigned, hereby make application for the change of a licensed vehicle registration number.

1. Applicant's Details (This must be the owner of the vehicle)

- 1) Rother District Council Driver Number (if applicable)
- 2) Title: Mr Mrs Miss Ms Other.....
- 3) First Name
- 4) Family Name.....
- 5) Home Address
-
- Postcode

2. Contact Details

- 1) Home 2) Work 3) Mobile
- 4) Email

3. Vehicle Details

- 1) Previous Registration Number..... 2) New Registration No
- 3) Make..... 4) Model..... 5) Date of First Registration

7. Ownership Requisition

I DECLARE that I am the owner of the vehicle in respect of which this application is being made and that the following person(s) are either part proprietor or are concerned in the keeping, hiring or driving of the vehicle

Name	Address	Nature of Association

8. The following documents are required:-

- Vehicle registration document in applicant’s name showing new registration number
- Certificate of Insurance showing new registration number
- Administration Fee (card or cheque)

9. Payment Required

Change of Vehicle Registration Number

10. Declaration

Data Protection Act 1998:

Rother District Council (“The Council”) will act as Data Controller in respect of your personal data held. By signing and returning this form to the Council you give consent to us to process sensitive personal data about you where this is necessary, for example health information.

You have the right to apply for a copy of your personal data (for which a small fee will be charged) and to have any inaccuracies corrected.

Audit Commission Act 1998:

The Council 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 share this information with other departments within the Council or external organisations responsible for auditing and administering public funds for these purposes.

For further information, see: www.rother.gov.uk or contact the Licensing Officer on 01424 787550

I understand that the information that I have given in this form and in any other form completed in respect of my application will be taken into account by the Council when determining the application. I declare that all such information is true and complete to the best of my knowledge and belief and acknowledge that I shall be liable to prosecution if I have made a false statement or omitted any relevant fact.

I confirm that I have read and understood the conditions booklet supplied to me by the Council relating to this application. I understand I must comply with the conditions that will be attached to the licence if it is granted.

Signature Date

How to Contact us:

T: 01424 787550 E: licensing@rother.gov.uk W: www.rother.gov.uk

Environmental Health, Rother District Council, Town Hall, Bexhill-on-Sea, TN39 3JX