



Elmbridge Borough Council

... bridging the communities ...

Environmental Services
Civic Centre, High Street
Esher, Surrey KT10 9SD
Telephone: 01372 474750
Fax: 01372 474915
DX: 36302 Esher

Email: envhealth@elmbridge.gov.uk
Website: www.elmbridge.gov.uk

Private Hire Operator Notification of Change of Address

GDPR Privacy notice

Who we are and what we do

Elmbridge Borough Council is the 'Controller' of any personal data that you provide to us. We collect, process and store your personal data in relation to your application for a licence.

What we need to process your application

We require you to provide personal data including your name, address and contact details.

Why we need it

We use your personal and sensitive data to enable us to process your application. If you do not provide this information we cannot process your application.

What we do with it

We will store your personal data in our licensing database and it will be accessed by authorised Council employees. We will use your data to enable us to monitor compliance with your licence and to carry out our enforcement duties. We may share your personal data with the other public bodies and enforcement authorities for the purposes of investigation, to protect public funds and prevent and detect fraud. We may also share your personal data with insurance companies, the DVLA and the Council's medical advisor.

How long we keep it

If we do not grant your licence, we will retain your data for six years from the date of the final decision on your application. If we grant your licence, we will retain your data for the period of the licence and a further six years.

What are your rights?

Please refer to our corporate privacy policy at <http://www.elmbridge.gov.uk/privacy-notices/>



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Please complete form in **BLOCK CAPITALS**

Current Licence Details:

Operator Name: (as per current licence)	
Operator Number:	OPE _____
Address:	
Postcode:	
Date moving / moved out	___ / ___ / ____

New Details:

Address:	
Postcode:	
Date moved in:	___ / ___ / ____
Operator Telephone No:	

Change of Address details submitted by (print name) : _____

Signature: _____

Date: _____

Important note:

When you have completed this form you must submit, **along with your current licence document and fee**, to the Environmental Services Team at the above address. The Licence will be returned to you once the relevant amendments have been made.