
Application to transfer ownership of a taxi or private hire vehicle

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

You must supply 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 check compliance with your licence, to carry out our enforcement duties and to contact you about licensing matters. 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 and the DVLA.

How long we keep it

If we do not grant your licence, we will keep your data for six years from the date of the final decision on your application. If we grant your licence, we will keep 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 elmbridge.gov.uk/privacy-notices/



Application to transfer ownership of a taxi or private hire vehicle

You should use this form to apply to transfer ownership of an existing taxi or private hire vehicle to you.

Please read the guidance on our website elmbridge.gov.uk/licensing before you complete this form. Please note, if you do not properly complete all our application requirements, we will reject your application.

Section 1: About the existing licence holder

Title	
First name and other forenames	
Last name	
OR	
Name of business or Ltd Company	
Company number (if Ltd Company)	
OR	
Partnership name	

Section 2: About the vehicle

Registration number	
Plate number	HCV
Plate number	PHV

Section 3: About you (the applicant)

An individual		(Go to Box A)
A partnership		(Go to Box B)
A business or Ltd Company		(Go to Box C)

Box A: Individual applicant

Please complete all questions

Title	
First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	
Post code	
Date of birth	
National insurance number	

Go to Section 5

Box B: Partnership first partner

Please complete all questions

Title	
First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	
Post code	
Date of birth	
National insurance number	

Box B: Partnership second partner

Please complete all questions

Title	
First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	

Post code	
Date of birth	
National insurance number	

Go to Section 5

Box C: Business or Limited Company

Please complete all questions

Name of business or Ltd Company	
Company number (if Ltd Company)	
Preferred telephone number	
Alternative telephone number	
Email address	
Company registered address	
Post code	

Go to Box D

Box D: Directors – first director

Please complete all questions

Title	
First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	
Post code	
Date of birth	
National insurance number	

Box D: Directors – second director

Please complete all questions

Title	
First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	

Post code	
Date of birth	
National insurance number	

Box D: Directors – third director

Please complete all questions

Title	
First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	
Post code	
Date of birth	
National insurance number	

Go to Box E

Box E: Company secretary

Please complete all questions

Title	
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First name and other forenames	
Last name	
Preferred telephone number	
Alternative telephone number	
Email address	
Home address	
Post code	
Date of birth	
National insurance number	

Section 5: The vehicle

Vehicle registration number				
Date first registered				
Make of vehicle				
Model of vehicle				
Colour of vehicle				
Fuel type				
Number of passenger seats (excluding the driver)				
Does the vehicle have a sun roof	Yes		No	
Does the vehicle have a dark tint applied to the rear and/or rear side windows of the vehicle?	Yes		No	
If you answered yes, What percentage of light is transmitted through the windows?				
Is the vehicle licensed as a taxi or private hire vehicle with another authority?	Yes		No	

If you answered yes				
a) Which authority is the vehicle licensed with?				
b) Licence plate number				
c) Date licence expires:				
Please give the full address where the vehicle will be kept when not in use as a taxi or private hire vehicle				
Is the vehicle wheelchair accessible?	Yes		No	
If yes:				
Is it a purpose-built wheelchair accessible vehicle?	Yes		No	
Is it converted to be wheelchair accessible?	Yes		No	

Section 6: Ownership of the vehicle

Are you the sole owner of the vehicle?	Yes		No	
If you answered no, please give the name(s) of the vehicle owner				
Owner 1				
Owner 2				
Owner 3				

Section 7: Other licence applications

Have any of the individuals listed in Boxes A to E above, ever had any taxi or private hire licence suspended, refused, or revoked?

Yes

No

If you answered yes, please give the:

(a) name of the Council that issued the licence

(b) reason for suspension, refusal, or revocation

Section 8: Convictions or cautions

Please read our Convictions Policy before you complete this section.

Has any individual listed in Boxes A to E above, ever been convicted of, or received a caution for any offence (including motoring offences)?

Yes

No

If yes, please give details:

Is any individual listed in Boxes A to E above currently the subject of any investigation by the police or any other authority (including motoring offences)?

Yes

No

If yes, please give details:

Section 9: Relevant documents

I attach copies of the following documents in respect of all individuals listed in Boxes A to E above

Data Barring Service (DBS) Basic Certificate

Evidence of my registration with the DBS Update Service	
Overseas criminal record disclosure (if applicable)	
Photograph(s)	
Evidence of right to work in the UK	
Child sexual exploitation training pass certificate	
The correct fee	
Certificate of motor insurance	
Vehicle registration document	
Letter of consent (if applicable)	
MOT certificate	
Individual Vehicle Approval (IVA) certificate (if applicable)	
DVSA IVA Certificate M1 (if applicable)	
The correct fee	

Section 11: Declarations

All persons listed in boxes A to E must sign this form

Under Section 57 Local Government (Miscellaneous Provisions) Act 1976 It is a criminal offence to make a false statement or withhold information to obtain a taxi or private hire vehicle licence. If convicted, you may be liable to a fine up to level 3 on the standard scale.

I confirm that I have read the privacy notice on the first page of this application form and I understand my rights in respect of that data and consent to how the Council will process my personal data.

I confirm that I have read the Elmbridge Borough Council's Taxi and Private Hire Licensing Policy and its Convictions Policy.

I confirm that I have a right to work in the UK. I understand that the Council will check my immigration status and will refuse my application if I am not legally present in the UK or if I am not allowed to work in the UK as a taxi or private hire vehicle proprietor.	
I understand I may have to produce the original documents referred to above before the Council will issue my taxi or private hire vehicle licence.	
I declare that the information contained in this form is correct to the best of my knowledge and belief.	

Please email your completed application form to licensing@elmbridge.gov.uk and attach each of the documents listed in section 8 above. In the subject please write "Vehicle transfer:" followed by your name. We will only accept one file for each document. Please do not send the documents as one large file, as individual pages, or in separate emails.

Signature	
Name	
Date	
Signature	
Name	
Date	
Signature	
Name	
Date	
Signature	
Name	
Date	