NOTIFICATION OF CHANGE OF ADDRESS HACKNEY CARRIAGE AND PRIVATE HIRE VEHICLE PROPRIETORS, DRIVERS AND OPERATORS



Title:	Surname			
First names:				
Previous address:				
Post code:				
New address:				
Post code:				
Date of change:				
Phone no:	M	obile 'phone:		
Email:			@	
Please tick box for each licence held & provide licence number:				
Hackney Carriag	je 🗌	Licence No / Ref:		
Hackney Carriag	je Driver	Licence No / Ref:		
Private Hire Vehi	icle 🗌	Licence No / Ref:		
Private Hire Drive	er 🗌	Licence No / Ref:		
Private Hire Ope	rator 🗌	Licence No / Ref:	Trading Name:	
Signed:			Dated:	
When completed, please return this form to the Licensing Team as follows:				
By post or in person : Taxi Licensing Team, Crawley Borough Council, Town Hall, the Boulevard, Crawley, West Sussex, RH10 1UZ				

By email: <u>Taxis@crawley.gov.uk</u>

**Please ensure a contact telephone number is provided so that payment can be taken upon receipt of notification

Crawley Borough Council will only use your information for the provision of this service. For more detail about how we handle your personal data please see our privacy policy, available online <u>http://www.crawley.gov.uk</u>