**Private Hire/Hackney Carriage Vehicles**

**Accident / Incident / Damage Report**

Name of Vehicle Proprietor ……………………………………………… Badge No. ……………..

Address …………………………………………………………………………………………...…….

……………………………………………………………………………………………………………

……………………………………………………………………………………………………………

Vehicle Reg No. ………………….. Type: HC/PH (delete) …………... Plate No. ………………

Vehicle Make / Model ………………………………………………. Colour……………………..

Name of Driver at Time of Accident ………………………………… Badge No. ……………….

Accident Time ………………………………………… Date ……………………………………….

Place …………………………………………………………………………………………………...

Where is the Vehicle? ..............................................................................................................

Are you still able to use the Vehicle? **Yes/No** Incident Number ………………………….

Has the incident been reported to the Police Yes/No Incident Number ………………..

Please indicate where and what damage has occurred on the aerial diagram of a vehicle on

the reverse side of this form.

Signed………………………………………………. Date …………………………………………

**This form must be submitted to the Council’s Licensing Officer at the Council Offices**

**within 72 Hours of the incident. Failure to do so is an offence under Section 50(3) of the**

**Local Government (Miscellaneous Provisions) Act 1976.**

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**Office Use Only**

**Date Received ………………………………….…………. Officer ……………………………………………**

**Licensing officer observations:**

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**Please indicate on the diagram where the damage is.**

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