

**Private Hire/Hackney Carriage Vehicle Notification of Accident Damage
Local Government (Miscellaneous Provisions) Act 1976 Section 50(3) Notification**

Without prejudice to the provisions of Section 25 of the Road Traffic Act of 1972, the proprietor of a Hackney Carriage or of a Private Hire vehicle licensed by a district council shall report to them as soon as reasonably practicable, and in any case within seventy two hours of the occurrence thereof, any accident to such hackney carriage or private hire vehicle causing damage materially affecting the safety, performance or appearance of the hackney carriage or private hire vehicle or the comfort or convenience of persons carried therein, (failure to do so is an offence and will result in action being taken against you).

Section A - The Vehicle

Licence Type (Please tick)	<input type="checkbox"/> Private Hire Vehicle	<input type="checkbox"/>
	<input type="checkbox"/> Hackney Carriage Vehicle	<input type="checkbox"/>

Registration Mark	<input type="text"/>	Plate Number	<input type="text"/>
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Make & Model	<input type="text"/>
Private Hire Operator (If applicable)	<input type="text"/>

Section B – The Notifier

Badge Number (If applicable)	<input type="text"/>	I am not a Licensed Driver	<input type="checkbox"/>
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Name & Address	<input type="text"/>
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Telephone Number	<input type="text"/>
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E- Mail Address	<input type="text"/>
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I was driving the vehicle when the accident happened

The person overleaf was driving the vehicle when the accident happened

Section C – The Driver

Badge Number

Name & Address

Telephone Number

E- Mail Address

Section D – The Accident

What was the date of the accident?

What was the time of the accident?

Where was the accident?

Please give brief description of how the accident happened:

If the car is in your possession can it be safely driven? Yes No

If the car was recovered where is it now?

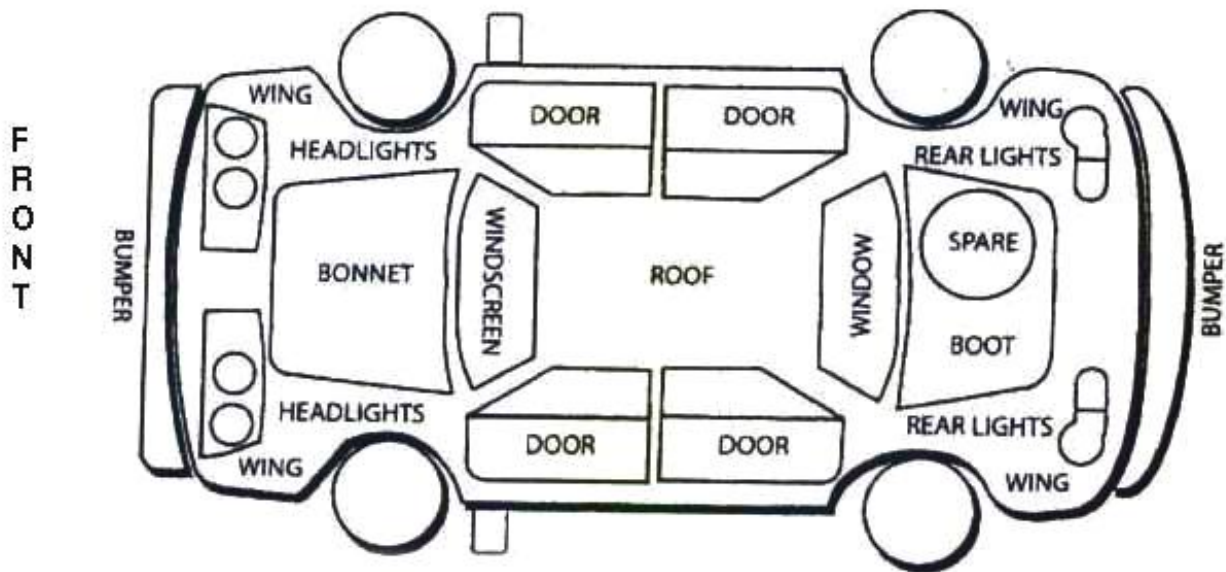
If other vehicles were involved please give details below:
 (If more than one vehicle was involved provide details on a separate sheet)

Name of Driver	
Vehicle Registration Mark, Make & Model	
Name of Third Party Insurance/Broker	

Section E – Vehicle Damage

Using this key, please indicate clearly on the diagram below the position and type of damage caused as a result of this accident only, where possible please provide photographs of the damage.

Key: S= Scratch; D = Dent; M = Missing



Please note that unseen damage may have occurred to the chassis of the vehicle.

Note: If the vehicle has been recovered and the matter is being dealt with by a claims company, please provide written confirmation of the extent of damage caused to the vehicle to include full name and contact details of the person carrying out any such assessment.

My vehicle licence plates are being returned to the Licensing Service with this notification Yes No

Section F – Injury To The Driver

Were you or the driver injured as a result of this accident? Yes No

If yes, how many days have you or the driver been absent from work as a direct result of the injuries?

Briefly describe any injuries

Do these injuries affect your ability to safely drive a vehicle? Yes No

Section G – Injury To Others

How many passengers were in the vehicle when the accident happened?

Who were the passengers?

Customers	<input type="checkbox"/>
Friends or Family	<input type="checkbox"/>

Were the passengers injured as a result of this accident? Yes No

Please describe what you believe the injuries are:

Name (if known)	Basic Description Of Resulting Injuries

Section H – Investigative Bodies

If any injuries were sustained or any other property was damaged, was this accident reported to the Police? Yes No

If yes, what was the reference number the police gave you?

Has the accident been reported to your insurance company? Yes No

If yes, what is your claim reference number?

Section I – Declaration

In making this notification, I confirm the following:

- a) **The information given is true to the best of my knowledge.**
- b) **I/We understand that it is a criminal offence to make a false statement or omit any material particular from this document.**

How We Collect And Use Information

The information collected, on this form and from supporting evidence, by Westmorland and Furness Council will be used to process your application. The information may be passed to the Department of Social Security, Employment Service and Inland Revenue as permitted by law.

We may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information from certain third parties, or give information to them to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, as permitted by law. These third parties include Government Departments and local authorities.

We will not disclose information about you to anyone outside Westmorland and Furness Council nor use information about you for other purposes unless the law permits us to.

Westmorland and Furness Council is the Data Controller for the purposes of the Data Protection Act 1998. If you want to know more about what information we have about you, or the way we use your information, you can email: taxis@westmorlandandfurness.gov.uk.

After an accident, insurance agencies and investigators often ask us for information about the accident and whether the vehicle and driver are licensed with us. If you would like to give us express permission to disclose relevant information, and speed up the processing of any claim you make, please tick here

(Please be aware that even if you do not give us permission, we may still disclose the information were we consider the disclosure is justified and it is allowed under the Data Protection Act 1998)

Signature		Date	
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Print Name	
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FOR CUSTOMER SERVICE ADVISOR'S USE

Date Received		Checked By	
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Photographs Received? Yes No

Vehicle Licence Plates Returned? Yes No