

Procedure Number:

CARRIAGE OF WHEELCHAIRS AND PROVISION OF "MOBILITY ASSISTANCE":

Applicant Details Licence Number Title Surname Forename(s) Home Address Postcode Tel No **Reason for Exemption** From April 2017, the government is providing greater support for wheelchair users on public transport by activating the remaining parts of sections 165 and 167 of the Equality Act 2010. Section 167 of the Act provides licensing authorities with the powers to make lists of wheelchair accessible vehicles (i.e. "designated vehicles"), and section 165 of the Act then requires the drivers of those vehicles to carry passengers in wheelchairs; to provide assistance to those passengers (eg loading wheelchairs with or without the passenger seated in it, carrying luggage

EXEMPTION APPLICATION FORM

etc); and prohibits them from charging extra for their services. However, to enable drivers with certain medical conditions that impact on these duties to drive or continue to drive Hackney Carriage and Private Hire Vehicles, the Act includes provisions for drivers to be exempted from these requirements on medical grounds. The Licensing Authority is responsible for issuing exemption certificates and needs to be satisfied that it is appropriate to do so on medical grounds.

| Vehicle Details | | |
|---|--|--|
| Make / model | | |
| Registration Number | | |
| Vehicle licence number | | |
| In determining whether to issue an exemption certificate the Licensing Authority will take into consideration the physical characteristics of the Hackney Carriage or Private Hire Vehicle. Please tick as appropriate: | | |
| You drive vehicles that have NO partition between the driver and the passenger compartment; or | | |
| You drive vehicles that have a partition between the driver and the passenger compartment | | |
| Nature of Medical Condition Most drivers with a medical condition severe enough to warrant an exemption are likely to be under a specialist (consultant) medical practitioner. It is therefore suggested that evidence be sought from a specialist as to the severity of the condition. The driver's General Practitioner should only be approached as a last resort. Please provide details of the medical condition you have: | | |
| Declaration | | |
| I declare that all the information provided on this form is true to the best of my knowledge. I understand that the grant of an exemption from the legal requirement to support a wheelchair user in a licensed Hackney Carriage or Private Hire Vehicle can be refused if any statements are subsequently found to be false. I undertake to keep the Council informed of any changes to any details provided on this form. I understand that a failure to do so will constitute a breach of the conditions under which exemption may be granted and, as such, may lead to the withdrawal of exemption, if granted. | | |
| Applicant Signature | | |
| Date | | |

| Medical Evidence (For completion by a Medical Practitioner) | |
|---|--|
| In your opinion, does the person named | |
| above have a medical condition that will | Yes / No |
| impact on the person's ability to carry / | |
| load a wheelchair into a licensed vehicle or | |
| provide "mobility assistance" (eg including | |
| the assisting of a person into a vehicle | |
| whilst seated in a wheelchair, carrying | |
| luggage etc)? | |
| If Yes, please provide details in the space bel | ow and attach any relevant medical reports |
| | |
| In your opinion, is this person's medical | |
| condition so severe that he/she should be | |
| exempt from the obligations set out in the | Yes / No |
| above section? | |
| Details of Medical Practitioner | |
| Name | |
| Signature | |
| Date | |
| Practice/Surgery/Hospital stamp | |
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