

TRANSFER OF INTEREST IN A LICENSED VEHICLE (APPLICATION FORM)

| From: | |
|---|-------------|
| Full Name Trading As | |
| Addres | |
| PostcodeTel No | |
| I hereby give notice that I have transferred my interest in the follow | ing vehicle |
| Registration Number | |
| Are you the sole proprietor of such vehicle and solely concerned in employing or letting the same for hire YES/NO | keeping, |
| If not, you must state the full name and address of every proprietor of such vehicle or person concerned either solely or in partnership employing or letting such vehicle for hire | in keeping, |
| | |
| | |
| Signature Date | |
| То: | |
| Full Name Trading As | |
| Addres | |
| PostcodeTel No | |
| Signature Date | |
| | |

This form must be accompanied by a valid insurance certificate, MOT certificate (if applicable), vehicle inspection certificate and registration document

| Please note this authority is under a duty to protect the public funds it administers, and to this end | |
|--|----|
| may use the information you have provided on this form for the prevention and detection of fraud. | Ιt |
| may also share this information with other bodies responsible for auditing public funds for these | |
| purposes. | |

| For Office Use Only: | £(paid on) | (date) | (initials) |
|----------------------|------------|--------|------------|
| (quick code 834) | | | |