



Hackney Carriage / Private Hire Driver

Medical Self Declaration.

(TEMPORARY COVID-19 PROVISIONS)

Applicants Full Name:

Date of Birth:

Badge Number:

I declare that to the best of my knowledge I have no underlying health conditions or issues with vision, that have not already been identified in a previous medical examination, that would affect my fitness to drive.

I understand that I must obtain and submit a full medical examination as soon as reasonable possible to the Licensing Authority at Stratford on Avon District Council.

Signature:

Print Name:

Date: