Exemption Application Form - (To be completed by applicant)

Exemption, for medical or physical grounds, from the duties to <u>assist</u> wheelchair passengers in accordance with Section 165 of the Equality Act 2010

Name		
	Post Code	
Telephone Number	Date of Birth	
Licensed Driver Number		
Make and Model of Wheelchair acc	cessible vehicle(s)	
Registration Number(s)		
Hackney/Private Hire Vehicle Licer	nce number(s)	
Please state the reason why you a	are applying for an exemption	
	ical grounds, this will need to be verified cal in connection with this application?	
Do you consent to relevant medica	al information being released to the auth	ority? *Yes/No
Medical Practitioner's Name(Please note this must be your registered	GP)	
Address		
	Phone Number	

If you are seeing a specialist for your condition please give details
Specialist's Name
Address
Phone Number
Are you applying for *Lifetime exemption/Temporary exemption
If temporary, please state the period for which you would want the exemption to last
Signature Date

Please note: It is an offence by failing to comply with a duty imposed on a driver in relation to disabled persons who are in wheelchairs unless you hold an exemption certificate. You could be liable upon conviction of a fine up to £1000.

Medical Assessment Form - (To be completed by Medical Practitioner)

Duties on Licensed Drivers to <u>assist</u> wheelchair passengers in accordance with Section 165 Equality Act 2010

Medical Exemption

Background

The Government is committed to an accessible public transport system in which disabled people can enjoy the same opportunities to travel as other members of society. Hackney Carriage (Taxis) and Private Hire vehicles are a vital link in the accessible transport chain and it is important that disabled people who use wheelchairs have confidence that the taxi they find on a rank or the private hire they book will assist them at no extra charge.

Northumberland County Council maintains a list of designated wheelchair accessible drivers in accordance with Section 167 Equality Act 2010. Therefore, Section 165 of the Act places duties on the drivers of designated wheelchair accessible taxis and Private Hire vehicles to:

- Carry the passenger while in a wheelchair
- Not make any additional charge for doing so
- If the passenger chooses to sit in a passenger seat, to carry the wheelchair
- To take such steps as are necessary to ensure that the passenger is carried in safety and reasonable comfort; and
- To give the passenger such mobility assistance as is reasonably required.

However, Section 166 of the Act allows Licensing Authorities to exempt drivers from the duties if they are satisfied that it is appropriate to do so on medical grounds or because the driver's physical condition makes it impossible or unreasonably difficult for him or her to comply with the duties.

In determining whether to issue an exemption certificate, the licensing authority will also have to consider a Doctors report and whether this is a temporary or permanent condition.

Please complete the following and send to:

Licensing Department
Northumberland County Council
Stakeford Depot
East View
Stakeford
Choppington
NE62 5TR

Medical Assessment with regard to duties of licensed drivers to assist persons in wheelchairs.

For completion by a Medical Practitioner/Specialist who has full access to the patients Medical History.

Patient's Name	
Licence Driver Number	
Address	
Medical Practitioner	
Official Practice Stamp	
In your opinion, does this person have a medical condition or disability which would make it difficult for them to provide physical assistance to persons in wheelchairs?	s / No
The types of assistance that may be required are; If the passenger wishes to remain in the wheelchair, the driver must help the passenger to get in and out of the vehicle and secure the wheelchair in accordance to the vehicle specification. If the passenger wants to transfer to a seat, the driver must help him or her to get out of the wheelchair and into a seat and back into the wheelchair; the driver must also load the wheelchair into the vehicle together with any luggage.	
If "Yes", please give details of the condition/disability (and attach copies of any relevant me Reports)	dical
Is this a temporary condition?	Yes/No
If 'Yes' please give date that Temporary Exemption should be granted till	

Medical Practitioner/Specialists signature
Date