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| **Personal Licence****Replacement or Amendment Form** |
| Full Name |  |
| Full Address |  |
| Contact Number |  |
| Personal Licence Number |  |
| Please tick the relevant change you would like to make |
| **Change of Address** [ ] (complete section 1) | **Change of Name** [ ] (complete section 2) | **Replacement Required** [ ] (complete section 3) |

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| **Section 1: Change of Address** |
| **Full Previous Address** |
|  |
| **Full New Address** |
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| **Section 2: Change of Name** |
| **Previous name in full** |
|  |
| **New name in full** |
|  |

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| **Section 3: Replacement** |
| **Please outline the reason for requesting a replacement** |
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| **Section 4: Checklist** |
|[ ]  I have enclosed 2 x passport sized photographs |
|[ ]  I have made payment of 10.50 (by cheque, calling our contact centre on 01858 82 82 82 or visiting the council offices) |
|[ ]  I have fully completed the relevant section on the form |

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| **Print Name** |  |
| **Signed** |  |
| **Dated** |  |