IL2

|  |  |
| --- | --- |
| sandwell_mbc_col |  TAXI LICENSING  SANDWELL COUNCIL HOUSE FREETH STREET  OLDBURY WEST MILDANDS B69 3DE 0121 569 6655 taxi\_licensing@sandwell.gov.uk |

**CHANGE OF ADDRESS**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you hold a Private Hire, Dual or Hackney Badge? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver Badge Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Address:

New Address:

Date moved to New Address:

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please either return this form to the above address or send by email to:

taxi\_licensing@sandwell.gov.uk