

**CITY OF WOLVERHAMPTON COUNCIL**  
**Local Government (Miscellaneous Provisions) Act 1976**  
**Licensing of Drivers of Hackney Carriages and Private Hire Vehicles**  
**MEDICAL CERTIFICATE**

Full Name of Applicant (BLOCK CAPITALS).....

Address.....

Signature of Applicant .....

**(TO BE SIGNED IN THE PRESENCE OF THE MEDICAL PRACTITIONER SIGNING THIS CERTIFICATE)**

You are 'Assessing Fitness To Drive' at Group 2 Standard, a guidance for medical professionals is available online at <https://www.gov.uk/guidance/assessing-fitness-to-drive-a-guide-for-medical-professionals>

I CERTIFY that I have this day examined the applicant, who has signed this form in my presence and has their two forms of identification as indicated below who is in my opinion  
**FIT**  **UNFIT**  to drive a hackney carriage or private hire vehicle.

- **Applicants are required to produce a medical certificate when they apply for their first licence.**
- **A further certificate should be produced once the age of 45 is reached and then;**
- **Every five years up to the age of 65.**
- **Once the age of 65 is reached a medical certificate should be produced every year.**

I recommend that this applicant needs to be reviewed

As per the above schedule  / Other .....

The applicant has provided one from each group of the following forms of identification, please indicate:

Group A: Passport  Driving Licence (photo)

Group B: Utility Bill (gas, electric, telephone, water)  Bank Statement

Birth Certificate  Marriage/Civic Partnership Certificate

Signature of Medical Practitioner ..... Date.....

Name (BLOCK LETTERS) .....

Please add address and phone number  
or Medical Practice Address Stamp