



NAME OF OPERATOR _____

	Driver Details	Driver Details	Driver Details
Surname			
Forename(s)			
Badge Number (PSV Only)			
Badge Issue Date (PSV Only)			
Date of Birth			
Full Postal address (inc post code)			
CRB Disclosure Issue Date			
Which authority is this driver CRB cleared through ie Hull/ East Riding. If PSV driver, please just state PSV			

I confirm that I have carried out enhanced CRB checks on the driver(s) listed above and after consideration of all information disclosed to the employer by the Criminal Records Bureau and local police, I consider the driver(s) above suitable to work with children and vulnerable people and to operate contracts for East Riding of Yorkshire Council. I understand that CRB disclosures are only valid for 3 years from date of issue for work on East Riding contracts and that I am responsible for ensuring the named driver(s) above always have a CRB disclosure which meets this validity criteria.

Signed:		Print Name:		Letter Sent to Contractor:	
Position in Company:		Date:		Date:	

Please ensure that all the information you have entered is legible. Forms which are incomplete/unreadable will be returned and this will delay the driver(s) being added onto the list of approved drivers.

When completed please return to: Passenger Services Unit The Offices (1st Floor) Beverley Depot Annie Reed Road Beverley HU17 0LF