



## **Draft Policy for Exemption Requests from carrying Assistance Dogs**

### **Statement of Intent**

1. The aim of this policy is to provide a process for drivers who have a certifiable medical condition which is aggravated by exposure to dogs to apply for an exemption from their duties to carry assistance dogs on medical grounds.

### **Introduction**

2. Section 168 of the Equality Act 2010 places duties on private hire and hackney carriage drivers to carry assistance dogs in their vehicles, and not charge extra for doing so.
3. An assistance dog, as prescribed under Section 173 of the Equality Act 2010, is:
  - a dog which has been trained to guide a blind person
  - a dog which has been trained to assist a deaf person
  - a dog which has been trained by a prescribed charity to assist a disabled person who has a disability that consist of epilepsy or otherwise affects the persons mobility, manual dexterity, physical co-ordination or ability to lift, carry or otherwise move everyday objects
  - a dog of a prescribed category which has been trained to assist a disabled person who has a disability
4. The Council must issue a driver with an exemption certificate if satisfied it is appropriate to do so on medical grounds.

## The Policy

5. Exemptions from carrying assistance dogs may be made in respect of individual drivers only.
6. Each application will be based on its own merit.
7. Applications for exemption from the requirements to carry an assistance dog may be considered where the following requirements are met;
  - 7.1 A request for exemption is made in writing, using the Council's Application for Exemption form  

Sufficient evidence supporting the request is presented to the Licensing Team from a medical professional, usually their general practitioner, or other Doctor who works at the applicant's own registered medical practice

Sufficient evidence may include allergen testing results, clinical history, details of any ongoing investigations, or a full diagnosis (for example severe allergy or cynophobia), including if the allergy is time limited. A simple statement from a medical professional will not be considered sufficient for the purpose of an exemption request
  - 7.2 The evidence presented proves that the driver cannot carry an assistance dog in their vehicle, as this would be detrimental to the drivers health
8. On receipt of an exemption request, the Licensing Manager will consider the request taking into account the supporting medical evidence.
9. For Hackney Carriage drivers, further consideration will be made taking into account the type of Hackney Carriage vehicle that will be driven. Particular consideration will be given to the interior of the vehicle, and whether the vehicle has a partition separating the driver from the assistance dog and passenger.
10. The Licensing Manager reserves the right to consider advice from the Council's Occupational Health service. Any costs incurred will be borne by the applicant.

11. If an exemption from carrying assistance dogs is granted, an exemption certificate and badge as prescribed by law will be issued to the driver.
12. An exemption will be granted for a specified period of time as determined by the Licensing Manager.
13. The prescribed exemption badge must be clearly displayed at all times in any Hackney Carriage or Private Hire vehicle that the exempt driver will be driving, and made available to an Authorised Officer on request.
14. The exemption badge and certificate remain the property of the Council, and must be returned at the request of the Licensing Team.
15. If you have any queries regarding this policy, please contact the Licensing Team at [licensing@bristol.gov.uk](mailto:licensing@bristol.gov.uk)



Licensing Team, (Temple Street), Bristol City Council, PO Box 3176, Bristol BS3 9FS  
 Email [licensing@bristol.gov.uk](mailto:licensing@bristol.gov.uk) Web [www.bristol.gov.uk/licensing](http://www.bristol.gov.uk/licensing) Tel: 0117 357 4900

**Equality Act 2010**

**Application for EXEMPTION from carrying Assistance Dogs in a Hackney Carriage or Private Hire Vehicle**

**Part 1 - To be completed by the applicant.**

Family / Surname	
First Names	
Date of Birth	
Contact Tel. Nos.	
Email	
PH/HC Badge Number	
Current Residential Address	
	Postcode:

**Part 2 - To be completed by a Medical Practitioner.**

Name of Medical Practitioner			
Address of registered surgery			
	Postcode:		
Contact Tel. Nos.			
Email			
I confirm the patient is registered at the medical practice detailed above and that I have had access to their medical records when completing this medical	Yes		No
Information on any condition, diagnosis or ongoing investigation	(you must attach copies of all relevant medical reports or evidence to support the request for exemption such as clinical history, ongoing investigations, or formal diagnosis)		

**Draft Exemption from Carrying Assistance Dogs Policy – PSP 18.09.2018**  
**APPENDIX C**

Please confirm if, in your medical opinion, an exemption from carrying assistance dogs should be granted.	Yes		No	
Please confirm if, in your medical opinion, any exemption should be time-limited, and for what period.				

**Doctor and Practice Details**

<b>Printed Name of Medical Practitioner</b>	<b>Surgery Stamp</b>
<b>Signature of Medical Practitioner</b>	
<b>Date</b>	

**Part 3 - To be completed by the applicant.**

I authorise my Doctor(s) and Specialist(s) to release report/medical information about my condition, relevant to my fitness to drive, to Bristol City Council in conjunction with my application for exemption and during the period that a licence (if granted) is in force.

I authorise Bristol City Council to disclose such relevant information as may be necessary to the investigation of my application for exemption, and during the period that a licence (if granted) is in force to doctors, paramedical staff, and to inform my doctor(s) of the outcome of the case where appropriate.

I understand that Bristol City Council may require me to undergo further medical tests at my expense now or at any point in the future, if a licence is granted, in order to establish my need for exemption.

I declare that I have checked the details I have given on this application and that, to the best of my knowledge and belief, they are correct.

**Signed**..... **Print Name**.....

**Date**.....