



TAXI COMPANY APPLICATION
Application Fee- \$20
(Complete one form per company)

1. Company Name _____
2. Company Business Address _____
3. Company Mailing Address _____
4. Company Telephone Number _____ E-mail Address _____
5. Name of Office Manager (if any) _____
6. List the names and addresses of all persons having a financial interest in the business or the profits thereof. (In the case of a corporation, the officers, directors and persons owning or controlling ten percent interest by way of a loan, ownership, or otherwise in the business, vehicles, or the profits thereof.) Any new owner, not previously listed, controlling 50% or more requires a new application. Licenses are non-transferable.

		% Interest
Name	Address	(Total should equal 100%)
A.	_____	_____
B.	_____	_____
C.	_____	_____
D.	_____	_____

7. Registered Name of Corporation _____ INCORPORATED
Place Date
- Registered Agent of Corporation _____
 Address _____

I have reviewed the application, DCI report and state certified driver's records of owners and determined that there is no information which would indicate that the issuance would be detrimental to the safety, health or welfare of residents of the City.

Police Chief _____
Date

Prior to issuance the following items must be verified by the City Clerk:

- _____ Minimum of 4 licensed taxicab drivers
(Provide a list with the names of all licensed taxicab drivers working for your company from your insurance provider and have each driver submit an application with requested documentation. The Clerk must be notified of any changes made throughout the year.)
- _____ Minimum of 4 qualified Taxicab vehicles
- _____ Copy of owner's DCI Report(s) and Certified Drivers Record(s)
- _____ Copy of Liability Insurance
- _____ Rate Card
(Provide a file copy that shows compliant procedures/hours of operation. A new card must be filed with the Clerk for any changes made throughout the year.)

City Clerk _____
Date