License Number				License Fee \$
To the Honorable Mayor, Com	mon Council, City			CLE FOR HIRE
BUSINESS NAME				
BUSINESS ADDRESS				
BUSINESS TELEPHONE				
OWNER(S) NAME				
OWNER(S) DATE OF BIRTH				
OWNER(S) ADDRESS				
OWNER(S) HOME TELEPHO)NE			
OWNER(S) DRIVERS LICEN NUMBER	SE			
		_	_	
INSURANCE CARRIER				
POLICY NUMBER				
POLICY LIMITS	 			
	RATION OF TH			NSURED, POLICY NUMBER, L BE IDENTIFIED ON THE
METHOD OF CHARGING		Metered Rates	Zone Rates	Vehicle Rental Rate

METHOD OF CHARGING	Metered Rates	Zone Rates	Vehicle Rental Rate
SCHEDULE OF RATES			
NUMBER OF VEHICLES TO BE LICENSED			

VEHICLE ID NUMBER	YEAR, MAKE & MODEL	CAPACITY	STATE AND LICENSE PLATE NUMBER

ATTACH A VEHICLE CONDITION CERTIFICATE FOR EACH VEHICLE CERTIFING THAT EACH VEHICLE TO BE USED FOR HIRE IS IN GOOD MECHANICAL CONDITION. THE CERTIFICATE MUST BE COMPLETED BY A REPUTABLE AUTOMOBILE MECHANIC OR GARAGE OWNER (and someone other than owner/owners employee).

Please read the following definitions.

- A crime is any offense (felony or misdemeanor) for which the penalty could or could not include, but is not limited to: a fine, jail time, imprisonment, or probation.
- A civil forfeiture action is a violation for which the only penalty is monetary, such as a speeding ticket or municipal disorderly conduct, etc.

1.	Have you	u ever t NO		ked, any Federal, State or Local permit HARGE – LOCATION – DATE	or license?	
2.	Have you ever been convicted of driving under the influence of alcohol, drugs or reckless driving? YES NO If "yes" indicate CHARGE – LOCATION – DATE					
3.	Have you	u ever t NO		e, traffic violation or civil forfeiture vi HARGE – LOCATION – DATE	olation?	
4.	4. Do you have pending against you, any crime, traffic violation or civil forfeiture violation? YES NO If "yes" indicate CHARGE – LOCATION – DATE					
5.	Are you YES	now or NO	have you ever been on If "yes" indicate C	probation or parole? HARGE – LOCATION – DATE		
this time	application ves and will co	will be ba omply wit	sis for denial/revocation of lice	nse. I further certify that the above automobiles wing to the mechanical condition of cars. I also aut	nolding information or making false statements on will be kept in good mechanical condition at all horize a review of and full disclosure of any and all	
SIC	SNATURE	OF AP	PLICANT		DATE	
DO			V THIS LINE			
Cľ	TY CLEI	RK'S C	OFFICE:			
Ap	plication	receive	d by:	Amount of fees received:	Date received:	
Per	mit Numl	ber:		Permit Effective:	Permit Expires	
Pro	oof of insu	ırance r	received:	Vehicle Inspections received:		
PO	LICE DI	EPART	TMENT:			
Ap	plication 1	has had	the required investigation	on.		
LIC	CENSE [] APP	ROVED [] DENIED			
If c	lenied, ple	ease sta	te reason:			
SIC				E	DATE	