

TAXI CAB LICENSE APPLICATION

City Of Pryor Creek

Date: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Phone: _____ Email: _____

Social Security: _____ Date Of Birth _____

DL # _____ State of Issue _____ Expiration _____

Copy of Certificate of Insurance with limits of \$ _____ Personal and \$ _____ Property
(Certificate shall show insurance carrier name, address and policy number)

Number of vehicles to operate within City limits _____

License Fee \$25.00 for first taxicab. Each additional taxicab \$15.00 each.

<u>Unit #</u>	<u>Year</u>	<u>Make</u>	<u>VIN #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Criminal Background:

If convicted of misdemeanor, felony, or traffic violations, list date and brief explanation:

Applicant Signature

Date

Chief of Police

Date

City Clerk

Date

LICENSE WILL NOT BE ISSUED UNTIL ALL VEHICLES HAVE BEEN INSPECTED BY THE CHIEF OF POLICE. MUST BE INSPECTED QUARTERLY BETWEEN THE 1ST AND 5TH OF JANUARY, APRIL, JULY AND OCTOBER. LICENSE WILL EXTEND FROM MAY 1ST THROUGH APRIL 30TH OF EACH YEAR. IF ANY VEHICLE IS INVOLVED IN AN ACCIDENT THE MAYOR AND COUNCIL MUST BE NOTIFIED.