



THE CITY OF BAKER CITY
APPLICATION FOR BIENNIAL CITY TAXICAB OR LIMOUSINE
LICENSE

INITIAL APPLICATION FEE: \$10.00
 LICENSE FEE \$100.00/BIANNUALLY PER VEHICLE LICENSED

DATE PAID: _____

Business/Organization Name: _____

Business Address: _____

Applicant/Owner's Name: _____

Applicant/Owner's Phone Number: _____

Applicant/Owner's Address: _____

Applicant/Owner's Personal Information:

DOB: _____ SSN: _____ ODL: _____

Number of Vehicles Owned/Operated by Owner on Application Date: _____

Number of Vehicles for Which License Desired: _____

Number and Suggested Location of Taxicab Stands if Sought:

List Each Taxicab/Limousine as Follows:

	Make	Model	Year	Capacity	Date Paid
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Has applicant (or any officers of the applicant) even been convicted of any crime, misdemeanors, or violation of any municipal ordinance or state law (other than minor traffic and parking offenses)? YES: ___ NO: ___

If yes, please state the nature of the offense(s) and the punishment or penalty set: _____

The answers made to each and all of the above questions are true and complete to the best of my knowledge and belief. I am aware that misstatement of material facts may cause rejection of my application, and I may be disqualified from receiving any license from the City of Baker City.

SIGNATURE:

Applicant/Owner

Date