



VEHICLE FOR HIRE BUSINESS APPLICATION FOR CITY LICENSE

City of Clinton
611 South 3rd Street
P.O. Box 2958
Clinton, IA 52733-2958
(563) 244-3421

License # _____
Date Issued: _____

SECTION I – NAME & ADDRESS

Name of Applicant

Home & Mailing Address	City	State	Zip
------------------------	------	-------	-----

Phone#

Race	Height	Hair Color	Eye Color
------	--------	------------	-----------

I do hereby make application for the following City License:

<input type="checkbox"/>	<u>Type of License</u>	<u>Must Comply with City Code Chapter</u>	<u>Fee</u>	<u>Fee After July 1st</u>	<u>Insurance Required</u>	<u>Expiration Date</u>
<input checked="" type="checkbox"/>	Limousine Business	114	\$60.00/vehicle	\$30.00/vehicle	\$1M	Dec. 31
	Taxi Cab Business	114	\$60.00/vehicle	\$30.00/vehicle	\$1M	Dec. 31

SECTION II – CORPORATION INFORMATION <i>Is applicant a corporation? If yes, complete this section, if not, go to Section III.</i>

Name/Title of Business

Business Address / Address Where Vehicle/s Stored

Proposed Rates of Fare

Stockholder Information – List All		
Name of Stockholder	Address	% of Shares

Corporation Directors & Officers – List All	
Name	Title



VEHICLE FOR HIRE BUSINESS APPLICATION FOR CITY LICENSE

City of Clinton
611 South 3rd Street
P.O. Box 2958
Clinton, IA 52733-2958
(563) 244-3421

License # _____
Date Issued: _____

SECTION III – PARTNERSHIP INFORMATION
Is applicant a partnership? If yes, complete this section, if not, go to Section IV.

Name/Title of Business

Business Address / Address Where Vehicle/s Stored

Proposed Rates of Fare

General Partners	
Name of Partner	Address
Limited Partners	
Name of Partner	Address

SECTION IV – SOLE PROPRIETOR INFORMATION

Name/Title of Business

Business Address / Address Where Vehicle/s Stored

Proposed Rates of Fare

Individual Information – List All		
Sole Proprietor’s Name	Address	% of Ownership

SECTION V - VEHICLE INFORMATION

Make	Model	Year	Mileage	Capacity	Color	VIN #	Plate #



VEHICLE FOR HIRE BUSINESS APPLICATION FOR CITY LICENSE

City of Clinton
611 South 3rd Street
P.O. Box 2958
Clinton, IA 52733-2958
(563) 244-3421

License # _____
Date Issued: _____

SECTION VI – BUSINESS INFORMATION

Proposed Rates of Fare:	
-------------------------	--

Insignia to Be Used to Designate the Vehicle or Vehicles of the Applicant:

--



VEHICLE FOR HIRE BUSINESS APPLICATION FOR CITY LICENSE

City of Clinton
611 South 3rd Street
P.O. Box 2958
Clinton, IA 52733-2958
(563) 244-3421

License # _____
Date Issued: _____

SECTION VII – PRIOR LICENSE REVOCATION

Has a similar license from the City of Clinton or any other jurisdiction been revoked? If yes, why:

SECTION VIII – RELEASE AND DISCLOSURE

I _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the City of Clinton, Iowa, whether said records are of a public, private or confidential nature, including criminal histories.

I _____, do hereby authorize the Clinton Police Department, or its designee, to obtain finger prints and take a photograph of myself for identification purposes.

I hereby swear and affirm that each that each statement and all information in or supplementing this application is complete and true and accurately recorded to the best of my knowledge. I understand that providing false, misleading and/or incomplete information on this application will result in my not obtaining a Vehicle for Hire Business City License in the City of Clinton, Iowa.

Signature of Applicant

Date



VEHICLE FOR HIRE BUSINESS APPLICATION FOR CITY LICENSE

City of Clinton
611 South 3rd Street
P.O. Box 2958
Clinton, IA 52733-2958
(563) 244-3421

License # _____
Date Issued: _____

SECTION IX – CONFIDENTIAL INFORMATION OF APPLICANT

Name of Applicant

Social Security #	Date of Birth	Place of Birth	Driver's License #
-------------------	---------------	----------------	--------------------

List all felonies and misdemeanor convictions, including traffic violations for the last ten (10) years:

SECTION X – CHECKLIST FOR APPLICANT
--

- | | |
|--------------------------|---|
| <input type="checkbox"/> | <i>City Application Completed?</i> |
| <input type="checkbox"/> | <i>DCI Background Check Form Completed?</i> |
| <input type="checkbox"/> | <i>ASE Certified Vehicle Inspection Report Submitted for Each Vehicle?</i> |
| <input type="checkbox"/> | <i>Proof of Insurance Submitted listing \$1M in coverage and City of Clinton as additional insured?</i> |
| <input type="checkbox"/> | <i>Financial Statement or Balance Sheet submitted?</i> |
| <input type="checkbox"/> | <i>All fees paid to City Finance Department?</i> |

All items must be completed and submitted to the City Clerk's office before the application can be approved.

Please allow at least 2 weeks for your City license application to be processed.

SECTION XI – OFFICE USE ONLY

License#	Fee Paid to Finance Office	DCI Background Check Completed	Approval by Police Department	Approval by BNS Department	Approved by Clerk