



## VEHICLE FOR HIRE BUSINESS APPLICATION FOR CITY LICENSE

City of Clinton  
611 South 3<sup>rd</sup> 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 checked="" 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>
	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

*Is applicant a corporation? If yes, complete this section, if not, go to Section III.*

Name/Title of Business

Business Address / Address Where Vehicle/s Stored

Proposed Rates of Fare      Email (required)

#### Stockholder Information – List All

Name of Stockholder	Address	% of Shares

#### Corporation Directors & Officers – List All

Name	Title



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### SECTION III – PARTNERSHIP INFORMATION

*Is applicant a partnership? If yes, complete this section, if not, go to Section IV.*

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Name/Title of Business

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Business Address / Address Where Vehicle/s Stored

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Proposed Rates of Fare

#### General Partners

Name of Partner	Address

#### Limited Partners

Name of Partner	Address

### SECTION IV – SOLE PROPRIETOR INFORMATION

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Name/Title of Business

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Business Address / Address Where Vehicle/s Stored

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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 #



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### SECTION VI – BUSINESS INFORMATION

Proposed Rates of Fare:

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



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### SECTION VII – PRIOR LICENSE REVOCATION

Has a similar license from the City of Clinton or any other jurisdiction been revoked?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

Yes

No

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### 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.

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Signature of Applicant

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Date



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## **SECTION IX – CONFIDENTIAL INFORMATION OF APPLICANT**

Name of Applicant

Social Security #      Date of Birth      Place of Birth (City, State)      Driver's License #  
(optional)

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

#### Aliases (List All Other Names Ever Used):

## **SECTION X – CHECKLIST FOR APPLICANT**

- City Application Completed?*
- DCI Background Check Form Completed?*
- ASE Certified Vehicle Inspection Report Submitted for Each Vehicle?*
- Proof of Insurance Submitted listing \$1M in coverage and City of Clinton as additional insured?*
- Taxicab Service Passenger Certificate issued by Iowa DOT obtained?*
- Financial Statement or Balance Sheet submitted?*
- All fees paid to City Finance Department?*

**\*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	Approval by Iowa DOT	Approved by Clerk