



Village of Amityville
 21 Ireland Place, Amityville, NY 11701
 Phone: (631) 264-6000 Fax: (631) 598-0363

Police _____

Application for: Taxicab Driver's License
In Accordance with Section 161-10 and 161-32

Fee: \$75.00 – cash or money order **New Application** **License Renewal**

Date Rec'd.: _____ Receipt No.: _____

NOTE: New licenses require fingerprinting and criminal background check. The Detective's office will schedule an appointment with the applicant to process the necessary requirements and advise the applicant of the fees needed for these requirements. Two (2) forms of ID, one being a driver's license, will be required. A date and time the applicant can respond to the predetermined location and have their electronic fingerprints taken will then be scheduled.

Notice: False replies to any of the questions herein under the law constitutes perjury. Detection of such falsity will result in refusal of license or, if granted, revocation of same.

Name: _____ Home Telephone: _____

Home Address: _____

Length of time at present address: _____ If less than five (5) years list previous addresses:

Name & Address of Taxi Co.: _____

Date of Birth: _____ Place of Birth: _____ Social Security: _____

Sex: _____ Citizen: _____ Marital Status: _____

Hair Color: _____ Eye Color: _____ Height: _____ **Attach two (2) 2" x 2" photos**

Previous Employment - names and addresses of employers for preceding five (5) years

| Dates | Employer | Address | Occupation |
|-------|----------|---------|------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Have you been arrested within the past 12 months?: _____ Convicted of a misdemeanor or felony: _____

If yes, give details and disposition of each charge: _____

Have you ever been licensed to drive a taxi? _____ Where? _____



Village of Amityville
21 Ireland Place, Amityville, NY 11701
Phone: (631) 264-6000 Fax: (631) 598-0363

Taxicab Driver's License (page 2)

Was license suspended or revoked? _____ If yes, give details: _____

Has any license heretofore been issued to you by the Village of Amityville ever been suspended or revoked? _____

If yes, give details: _____

List traffic violations:

New York State Chauffeur's License No.: _____ Expiration Date: _____

I, the undersigned, hereby apply to the Village of Amityville for a License to drive a taxicab in the Village of Amityville and for that purpose file the above photographs, fingerprints, and description of myself and give the above true and correct answers to the questions contained in this application. It is further agreed by the applicant that I will conform to all the rules and regulations of the Village of Amityville governing public taxicabs and public taxicab drivers.

MUST SIGN IN PRESENCE OF A NOTARY PUBLIC

Applicant's Signature

STATE OF NEW YORK, COUNTY OF SUFFOLK:

_____, being sworn, deposes and says that he/she is the individual making the foregoing application for a taxi driver's license.

Sworn to me this _____ day of _____, 20____.

Notary Public

PENALTY FOR FALSIFICATION

Falsification of any statement made herein is an offense punishable by a fine or imprisonment or both

===== **FOR USE BY VILLAGE CLERK'S OFFICE ONLY** =====

Records check requested from Police Department on: ____/____/____

Police Department Comments:

Application: Approved Disapproved

If Disapproved, for what reason(s):

If Approved, date of approval: ____/____/____

License No.: _____ Issued on: ____/____/____