

GREENVILLE POLICE DEPARTMENT

APPLICATION FOR PERMIT TO OPERATE TAXICAB/TRANSPORT, OR CONTRACTED SERVICES

INITIAL APPLICATION

RENEWAL

TRANSFER

TO: Chief of Police of the City of Greenville

Permit # _____

***All information must be answered to the best of the applicant's ability ***

I hereby make application for a permit to operate a taxicab in the City of Greenville, N.C.

1. Full name: _____ Phone: _____

2. Present address: _____

3. Time at present address: _____ years: _____ months.

4. Previous address: _____

5. Date of birth: _____

6. Height: _____ ft. _____ in.; Weight: _____; Hair: _____; Eyes: _____

7. SSN#: _____; Drivers License #: _____ State: _____

8. Are you are legal resident of the United States? ___yes ___no

9. Prior driving experience: Private/personal vehicle: _____ years; _____ months

10. Do you have prior driving experience transporting passengers (aside from operating a taxicab)? ___yes ___no

If yes, when and in what capacity did you transport passengers? _____

11. Do you have any physical impairment that would affect your ability to operate a taxicab? ___yes ___no

If your answer is yes, you may be required to provide a statement from your physician.

12. Name of company for which you are going to drive: _____

13. Have you ever been employed with a taxicab company previously? ___yes ___no

If you answer is yes, Name of company: _____

Address of company: _____

14. Have you ever been arrested or convicted for the following:

DWI: ___yes ___no

Alcohol Offenses: ___yes ___no

Assault: ___yes ___no

Prostitution or Solicitation for prostitution: yes ___no

Violation of Controlled Substances Act (Drugs): ___yes ___no

If yes, give details as to the date of arrest, court location, charge, and final disposition. Attach a certified copy of conviction/disposition. Attach extra pages if necessary.

15. Have you ever been convicted of a felony in this State or any other State? ___yes ___no. If yes, give details as to the date of

arrest, court location, charge, and final disposition. Attach a certified copy of conviction/disposition. Attach extra pages if necessary.

16. Have you ever been convicted of a crime involving the use of a weapon of any type? ___yes ___no. If yes, give details as to the date of arrest, court location, charge, and final disposition. Attach a certified copy of conviction/disposition. Attach extra pages if necessary.

STATEMENT:

I understand that my criminal history and driving record will be reviewed in order to verify the information I have disclosed in this application and the failure to answer truthfully in response to the questions on this application may cause the denial of the issuance of a taxi driver’s permit. I swear/affirm that the above information has been answered truthfully and is accurate and complete to the best of my knowledge.

Signature of Applicant

Sworn and subscribed before me on
this ____ day of _____, 20__.

Notary Public

My Commission expires: _____

NOTE TO APPLICANT:

When submitting this application, you must bring the following with you:

The initial application fee and permit fee is set by the Greenville City Council at **\$30.00** and must accompany this application when submitted. **THIS FEE IS NOT REFUNDABLE.**

Permits only are renewable annually for a fee of \$19.00.

STATUS OF APPLICATION: **APPROVED** _____ **DENIED** _____

DATE OF ACTION: _____

CHIEF OF POLICE