

VALLEJO POLICE DEPARTMENT
TRAFFIC DIVISION



TAXICAB DRIVER PERMIT APPLICATION

APPLICATION FOR: (Department Use Only)

Initial Permit Annual Renewal Duplicate Permit Additional Permit

APPLICANT INFORMATION (Type or Print Legibly – Use Blue or Black Ink)

Applicant's Full Legal Name: _____

Residence Address: _____ City/Zip: _____

Telephone Number: _____ Alternate Number: _____

Driver's License Number: _____ Expiration Date: _____

Social Security Number: _____ Birth Date: _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Other names (including nicknames) that you have used or been known by: _____

List other states where you have been licensed to operate a motor vehicle, the name under which the license was granted and the number: _____

Have you ever been convicted of any traffic violation? Yes _____ No _____

If yes, explain: _____

Have you ever been in a traffic collision? Yes _____ No _____

If yes, explain: _____

Do you have any mental or physical incapacity or infirmity which may affect or limit you driving ability?

Yes _____ No _____ If yes, explain: _____

PAST EMPLOYMENT (PAST 3 YEARS)

Firm Name: _____ Phone: _____

Address: _____ City/State /Zip: _____

Immediate Supervisor: _____ Employed From: _____ To: _____

Firm Name: _____ Phone: _____

Address: _____ City/State /Zip: _____

Immediate Supervisor: _____ Employed From: _____ To: _____

CRIMINAL HISTORY

Have you ever been **convicted** of **any** crime(s)? Yes _____ No _____

If yes, explain the circumstances (include crime, date of conviction, country, state and county where crimes were committed).

ACKNOWLEDGEMENT

PLEASE READ THE FOLLOWING DECLARATION AND WAIVER, BEFORE SIGNING.

I hereby swear or affirm under penalty of perjury that all the foregoing information is true and correct to the best of my knowledge and belief.

I am aware of the requirements of the Vallejo Municipal Code and I understand that any omission or untrue statements are cause for denial of this application. I also understand that the application fee is non-refundable.

I hereby authorize and request the Vallejo Police Department to furnish any and all information concerning my driving history and my criminal history, to the taxicab company I will be leasing from or employed by. This includes any information of a confidential or privileged nature provided that such information relates to my employment as a driver of a taxicab or automobile for hire. I hereby waive and release the City of Vallejo, its officers, agents and employees from any liability or damages resulting from the furnishing of confidential or privileged information to my employer. I hereby indemnify, defend, waive and hold harmless the City of Vallejo, its officers, agents and employees from any and all losses, claims, liabilities, damages, and expenses of any nature directly or indirectly arising out of or as the result of any act or omission by me or my employees, agents, or subcontractors in the operation of said vehicle. This indemnification and waiver shall be valid beyond the expiration, suspension or revocation of my permit.

Signature: _____ Date: _____

TO BE COMPLETED BY CAB COMPANY FLEET MANAGER:

I have reviewed and approved the completed taxicab driver application submitted by this applicant. The applicant is authorized to operate a taxicab for _____ Cab Company and will be covered and maintained as insured on the liability insurance policy of the company at all times. Further, this applicant has complied with all regulations and laws respecting this application.

Date: _____

Name (Print): _____

Signature: _____