



CITY OF BRIDGES...RIVER OF OPPORTUNITY

APPLICATION FOR TAXICAB LICENSE

NAME OF APPLICANT: _____

ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER: _____

NUMBER OF TAXICABS OWNED: _____ NUMBER OF TAXICABS OPERATING: _____

TAXICAB LICENSE FEE \$50.00
\$25.00 PER VEHICLE

NUMBER OF TAXICABS FOR WHICH A LICENSE IS DESIRED: _____

LOCATION OF CENTRAL BUSINESS OFFICE: _____

INSIGNIA TO BE USED TO DESIGNATE VEHICLES: _____

EXPERIENCE OF APPLICANT IN TRANSPORTING PASSENGERS: (State background briefly): _____

LIABILITY INSURANCE REQUIRED IN ACCORDANCE WITH Sec. 35-11 of Ottumwa Municipal Code
Insurance Requirements: \$100,000 per person, \$300,000 more than one person, \$50,000 property damage

LIABILITY INSURANCE COMPANY: _____

CERTIFICATE OF INSURANCE FILED WITH CITY CLERK? Y _____ N _____

SCHEDULE OF RATES & SERVICES ON FILE WITH THE CLERK? Y _____ N _____

DATE: _____

Signature of Applicant

Approved: _____ Denied: _____

CHIEF OF POLICE

License Number: _____

Receipt Number: _____