

TOWN OF OROMOCTO

APPLICATION FOR TAXICAB OWNER LICENSE

I, _____ of _____, being the owner of a motor vehicle(s) described as follows:

Vehicle Identification Number _____
 Make _____
 Model _____
 Year _____
 Current Year's Prov. _____
 License No. _____
 Motor Vehicle Inspection No. _____
 Date of Last Inspection _____ Within one month? _____
 Insurance Policy No. _____ Amount _____

make application to the Town Clerk for a Taxicab Owner License to operate _____ taxicabs. I propose to operate my taxicab(s). I propose to operate my taxicab(s) from the following address and I understand that I am required to immediately report, to the Town Clerk, my conviction for any offence specified at Section 3 of this by-law.

Signature of Applicant

This certifies that the above mentioned motor vehicle(s) are suitable for use as a taxicab, and that this applicant qualifies for a Taxicab Owner License under Section 3 (4) (h) and (i) of this by-law.

Police Chief

This certifies that the address from which it is stated that the Taxi Business will be operated has been reviewed and approved by the Planning Advisory Committee.

Secretary PAC

Date of Issue _____ Fee Collected _____

Term of License – From _____ To _____

No. Assigned to Taxicab _____ No. of Taxicabs Approved _____

Town Clerk

Details of a second, and subsequent vehicles, will be appended to this "Schedule A" as required.