



APPLICATION FOR PERMIT TO OPERATE A TAXICAB

VILLAGE OF CANASTOTA
205 S. PETERBORO STREET
CANASTOTA, NY 13032
(315) 697-7559

Name: _____

Company Name: _____

Address: _____

Phone Number: _____

Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____ State: _____ Expiration: _____

Class: _____ Copy of NYS Driver's License attached: yes no

Make/Model of Vehicle: _____ Year: _____ Plate No.: _____ Expiration: _____

Copy of NYS Registration attached: yes no

THE PERMIT FEE IS \$100 PER YEAR OR ANY PORTION THEREOF, PER VEHICLE. A SEPARATE APPLICATION IS REQUIRED FOR EACH DRIVER. UPON RECEIPT OF THE COMPLETED APPLICATION, THE APPROPRIATE PERMIT FEE AND COPY OF A VALID DRIVER'S LICENSE , NYS REGISTRATION AND CURRENT INSURANCE CARD, YOUR APPLICATION WILL BE REVIEWED AND, IF APPROVED, A PERMIT TO OPERATE A TAXICAB WILL BE FORWARDED TO THE APPLICANT. THE PERMIT SHOULD BE KEPT WITH THE VEHICLE AT ALL TIMES WHEN IN THE VILLAGE. BY SIGNING BELOW, THE APPLICANT STATES THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND UNDERSTANDS THAT THE VILLAGE OF CANASTOTA IS RELYING UPON SAME IN ISSUING THE REQUESTED PERMIT.

Signature of Applicant

Date

Application/Fee Received/Reviewed by

Date