FOR OFFICE USE ONLY

PAID #: _____
RECEIPT #: _____
DATE: _____
REC'D BY: _____

TAXICAB / LIMOUSINE DRIVER APPLICATION

Last Name _____ First Name _____ Middle Name _____

Mailing Address – Street _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Date of Birth _____ Race _____ Gender Male Female

Social Security Number _____ Drivers License Number _____

English Speaking? ☐ Yes ☐ No **Physical Disability?** ☐ Yes ☐ No

If you do have a disability, please explain further: _____

U.S. Citizen? ☐ Yes ☐ No If no: _____
Registered Alien Number

(1) Please list type, date and location for all traffic citations and/or accidents for the past three years: (Use back of form if necessary):

_____

_____

(2) Name of Company Driving for: _____

(3) Have you been convicted within the last 5 years for any of the following:

☐ Yes ☐ No Prostitution or related offenses?
☐ Yes ☐ No Driving while intoxicated?
☐ Yes ☐ No Driving while under the influence of drugs?
☐ Yes ☐ No Any felony or other offense involving moral turpitude?

If yes to any of the above, please give date and location: _____

_____

This license will be voided if licensee's State of Texas driver's license is suspended or revoked. This license must be returned to the Plano Police Department within three (3) days of such suspension or revocation.

_____ _____
Signature of Applicant Date

This application must be filled out in its entirety. A non-refundable $10.00 processing fee must accompany each application as established by ordinance. Applications will be processed and applicants will be notified upon approval. Permits will be issued between 8:00 a.m. and 4:00 p.m. Monday through Friday.