

**CITY OF NORWALK
TAXICAB DRIVER'S LICENSE APPLICATION**

New _____ Renewal _____ Company _____

To the Norwalk Safety/Service Director:

I hereby make application for a license to drive a taxicab in the City of Norwalk, Ohio.

Applicant's Name _____ Telephone _____

Applicant's Residence _____ Social Security No. _____

_____ Date of Birth _____

Ohio Driver's License No. _____

(attach copy of license)

U.S. Citizen? Yes _____ No _____ If no, permanent Resident ID # _____

Do you possess a taxi driver's license in this or any other city/town in Ohio? Yes _____ No _____

Have you ever held a Norwalk taxi driver license? Yes _____ No _____

Are you presently employed at an alternative occupation? Yes _____ No _____

If yes, what occupation? _____

Have you ever been arrested? Yes _____ No _____

If yes, when, where, and for what offense? _____

What was the disposition of the charge? _____

Do you have a police or criminal record? Yes _____ No _____

Have you had any motor vehicle violations? Yes _____ No _____

Form must be accompanied by:

1. a current BCI&I background check on the applicant generated within the past 30 days of the date of application; and
2. a current OBMV Driver Abstract for the applicant generated within the past 30 days of the date of application.

In signing this application, I hereby give permission to the City of Norwalk to conduct a background check. All information included on this application is true and accurate to the best of my knowledge.

Signature of Applicant

Date

For Internal Use Only

Received date _____

Received by _____

Approval date _____

Denial date _____

Reason for denial _____

Safety/Service Director Signature

Copy of Driver's License BCI&I Report (30 days) OBMV Driver Abstract (30 days) fee paid

Expiration Date _____