

City of Asbury Park

Medallion No. _____

TAXI AND LIVERY OWNER'S LICENSE RENEWAL

Renewal Date _____

IMPORTANT NOTICE: False replies to any of the questions herein under the law constitutes perjury; detection of such falsity will result in refusal of license, or if granted in revocation of same. The following application must be properly filled out and all questions answered. If any portion of this application is incomplete it can not be accepted for consideration.

***** THE FOLLOWING INFORMATION MUST BE PRINTED OR TYPED, IF ILLEGIBLE IT WILL BE RETURNED. *****

Medallion License Renewal for the year 20 _____

OWNER INFORMATION:

Date of Last Renewal: _____

NJ Motor Vehicle Driver's License No. _____ Expiration Date: _____

Full Name of Present Owner: _____ Social Security No. _____

Home Address (No P.O. Boxes) _____ Apt. No. _____

City _____ State _____ Zip _____ Home Phone _____

If a corporation, please list officer's names, addresses and telephone number _____

APPLICANTS MUST BRING ORIGINAL SOCIAL SECURITY CARD, NEW JERSEY MOTOR VEHICLE REGISTRATION CARD, AND CERTIFICATE OF INSURANCE NAMING THE CITY OF ASBURY PARK AS CERTIFICATE HOLDER.

Medallion No.:	License Plate No.:	Vehicle Identification No.:
Car Make:	Model:	Color: Year:
Name of Insurance Co.:	Insurance Policy Number:	Policy Expiration Date:
Insurance Agent's Name:	Agent's Address:	Agent's Telephone No.:

POLICE DEPARTMENT

I have reviewed the application and required documentation and recommend to: _____

If denied, please state reason why: _____

Signed: _____ Date: _____

for the Asbury Park Police Department

QUESTIONS TO BE COMPLETED BY OWNER:

Do you hold an owner's license(s)? _____ If yes, please list No.(s) _____

Are you a holder of, or a member of a partnership or corporation holding any type of license issued by the City of Asbury Park: _____

If yes, give particulars: _____

Has your motor vehicle registration been suspended or revoked within the last 365 days? If yes, give particulars. _____

Out of what company base do you operate? _____

Has any summons for violation of the Taxi and Livery Ordinance been issued to your medallion in the last 365 days? If yes, please list. _____

THE CITY CLERK'S OFFICE MUST BE NOTIFIED OF ANY CHANGES IN THE ABOVE INFORMATION. RENEWAL APPLICATION FEE IS NON-REFUNDABLE.

I certify that all the information on this application is true and correct to the best of my knowledge. The City of Asbury Park has my permission to certify this information.

Owner's Signature/Authorization _____

Date _____

THIS PORTION OF APPLICATION IS TO BE COMPLETED BY THE CITY CLERK

In consideration of the granting of this license hereby applied for, the applicant agrees that service of any paper, notice, letter, summons, complaints or legal process of any kind or nature may be made by the City of Asbury Park, or any Department thereof, upon the person to whom the license is issued by leaving a copy of any such paper, notice, letter, summons, complaints or legal process with any member of his family or other person with whom he or she may reside at the address written above.

It is further agreed by the applicant that he will conform to all the rules and regulations of the City of Asbury Park Taxi and Livery Ordinance.

State of New Jersey,
County of Monmouth, ss:

_____ being duly sworn, deposes and says that he/she is the individual making the foregoing application for a Taxi or Livery Driver's License; that the answers to the foregoing questions and the other statements contained therein are true of _____ to my knowledge.

Sworn to before me this _____
day of _____

Applicant's Signature _____