

License No.:	City of Asbury Park TAXI And LIVERY DRIVERS License Application	Date Issued:
Document No.:		

INITIAL APPLICATION _____

RENEWAL APPLICATION _____

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 BY THE APPLICANT. IF ANY PORTION OF THIS APPLICATION IS INCOMPLETE IT WILL NOT BE ACCEPTED FOR CONSIDERATION.

***** The following information must be printed or typed. If illegible it will be returned. *****

Full Name: _____ Social Security No. _____

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

City: _____ State: _____ Zip: _____ Home Phone: _____

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

Date of Birth	Circle One: Male Female	Photo: Must Supply (3) Three
Place of Birth:	Weight: Eye Color: Hair Color:	2" x 2" Color Photographs Date of Photos:

APPLICANT'S MUST BRING ORIGINAL SOCIAL SECURITY CARD, RESIDENT ALIEN CARD (if applicable), N.J. DRIVER'S LICENSE AND A CURRENT DRIVER'S ABSTRACT FROM THE NEW JERSEY DIVISION OF MOTOR VEHICLES.

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

I certify that I have read and personally completed this application and that all the information on this application is true and correct to the best of my knowledge.

Applicants Signature: _____ Date: _____

POLICE DEPARTMENT

I have reviewed the application and required documentation and recommend to the Asbury Park/Livery Department to:

Approved _____ Denied _____

If denied, please state reason why: _____

Signed: _____ Date: _____

For the City of Asbury Park Police Department

THIS PORTION OF APPLICATION TO BE COMPLETED BY THE CITY CLERK

In consideration of the granting of this license hereby applied for applicant agrees that service of any paper, notice, letter, summons, complaint 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, complaint or legal process with any member of his family or other person with who he or she may reside at the address given above.

It is further agreed by the applicant that he will conform to all 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 say that he or she is the individual making the foregoing application for a Taxi and Livery Driver's License, that the answer to the foregoing questions and other statements contained therein are true of the applicant's own knowledge:

Sworn to before me this _____ day of _____, 20 _____

Applicant's Signature

1. Have you ever held a license or applied for a license to drive a taxi: _____

If yes, identify when and where you applied for and held a license to drive a taxi: _____

2. Has any Taxi/Livery license issued to you by the City of Asbury Park or any other municipality ever been suspended or revoked?

If yes, identify when and where the reason for suspension or revocation: _____

3. Have you ever been issued any summons for violation of the Taxi and Livery Ordinances in the last 365 days? _____

If yes, please list type of violation outcome (not guilty, guilty) and date: _____

4. Have you ever been convicted of driving while intoxicated or under the influence: _____

5. Have you ever been convicted of a felony and/or indictable offense? _____ If yes, identify the offense, date and location of conviction: _____

6. Please list your residence(s) for the last two years:

Dates:	Street Address/Apt. No.:	City:	State or Country:
From: To:			
From: To:			

7. Give name and address of your last two employers:

Dates:	Name of Employer:	Address, City, State:	Occupation:
From: To:			
From: To:			

8. Have you been issued any motor vehicle summons in the last 365 days? _____ If yes, list town where violation occurred, type of violation, outcome (not guilty, guilty) and date: _____

9. Has your vehicle driver's license ever been suspended or revoked? _____, If yes, identify dates of and reasons for suspensions or revocations: _____

10. List state(s), other than N.J. in which you have held a driver's license _____