

CITY OF HOOD RIVER
APPLICATION FOR TAXICAB DRIVER
HRMC 5.20

New or Renewal (Non-refundable) Fee: \$46

** \$12 check or money order written to Oregon State Police for Background Check

Date _____ New _____ Renewal _____

Taxi Company Name _____
Address _____ Phone _____

Applicants

Full Name _____ Date of Birth _____

All names previously used: _____

Home Address _____ Phone _____

Driver's License # _____ State _____

** Attached a copy of your driver's license to this application. (OR or WA license required)*

Note: Commercial Class C license required to drive any vehicle designed to transport 16 or more

List employment history for the past five years:

<u>EMPLOYER</u>	<u>TYPE OF WORK</u>	<u>FROM</u>	<u>TO</u>

List other addresses for past 3 years:

<u>ADDRESS</u>	<u>CITY</u>	<u>FROM</u>	<u>TO</u>

List 4 personal references (not relatives):

<u>NAME</u>	<u>ADDRESS</u>	<u>CITY</u>	<u>TELEPHONE</u>

Have you ever been convicted of a crime involving moral turpitude or a dangerous drug?

Yes _____ No _____

If yes, give details as to charge, court and date _____

Have you ever been convicted of a major traffic offense (driving under the influence of intoxicants, driving while suspended, reckless driving, or hit and run)?

Yes _____ No _____

If yes, give details as to charge, court and date _____

List 4 credit references:

<u>BUSINESS</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Insurance Company _____ Policy # _____

Agent _____ Phone _____

By signing this permit I am stating that I have read it in its entirety and agree to comply with all applicable ordinances, resolutions and policies of the City of Hood River.

"I certify all information given on this application, and any supporting information, is true and complete. I hereby authorize the City of Hood River to make all necessary contacts and/or inquiries needed to check my background, and to ensure I qualify for this permit. I also hereby authorize the City of Hood River to conduct a criminal background check and obtain a copy of my criminal record, if any. All references are authorized to release to the City of Hood River all information requested which they might have about me. I hereby release all references and the City of Hood River from any liability which might be claimed because of information provided by such references or background checks."

Signature

Date

CITY USE ONLY

Chief of Police

Date

Approved _____ Denied _____

License issued: _____ Receipt # _____ License # _____ Expires: _____