



TAXI COMPANY VEHICLE INFORMATION

Taxi Company Name:	
Color Scheme, Name, Monogram, or Insignia that will be used on the Taxicabs:	
Vehicle 1:	Vehicle 2:
Make, Model, and Year of Vehicle:	Make, Model, and Year of Vehicle:
VIN Number:	VIN Number:
Seating Capacity:	Seating Capacity:

For additional vehicles please use an additional form.

I certify that I have knowledge of Ordinance 2464 governing the permit for which I am applying and that the above information is a true and accurate statement of fact.

Signature of Applicant _____ **Date** _____

OFFICE USE ONLY – DO NOT WRITE IN THIS AREA

Code Compliance Vehicle Inspection

Vehicle 1: Permit # _____

Vehicle 2: Permit # _____

- | | |
|--|--|
| <input type="checkbox"/> Taxi Meter Inspection Certificate visible in cab
<input type="checkbox"/> Top light identifying it as a Taxicab
<input type="checkbox"/> Co. Name & phone# where service can be requested displayed on exterior of cab
<input type="checkbox"/> Cell phone or radio for dispatching calls for service
<input type="checkbox"/> Copy of Taxi Co. Permit with VIN (Renewal only)
<input type="checkbox"/> Notice with information on how to file a complaint under this ordinance
<input type="checkbox"/> Fare pricing posted inside the cab
<input type="checkbox"/> Taxicab Inspection Form completed | <input type="checkbox"/> Taxi Meter Inspection Certificate visible in cab
<input type="checkbox"/> Top light identifying it as a Taxicab
<input type="checkbox"/> Co. Name & phone# where service can be requested displayed on exterior of cab
<input type="checkbox"/> Cell phone or radio for dispatching calls for service
<input type="checkbox"/> Copy of Taxi Co. permit with VIN (Renewal only)
<input type="checkbox"/> Notice with information on how to file a complaint under this ordinance
<input type="checkbox"/> Fare pricing posted inside the cab
<input type="checkbox"/> Taxicab Inspection Form completed |
|--|--|

Inspected by _____ Date _____ In Compliance Out of Compliance



INFORMACION DEL VEHICULO COMPANIA DE TAXI

Nombre de la compañía de taxi:	
Combinación de color, emblema, marca, o nombre que se utilizara en los taxis:	
Vehículo 1:	Vehículo 2:
Marca, modelo y año del vehículo:	Marca, modelo y año del vehículo:
Número de Serie/ VIN:	Número de Serie/ VIN:
Capacidad de asientos:	Capacidad de asientos:

Favor de usar otra solicitud para vehículo/s adicional/es.

Yo certifico que tengo conocimiento de la Ordenanza de 2464 que regula el permiso que hoy estoy solicitando y que la información anterior es de hecho una declaración verdadera y exacta.

Firma del solicitante _____ **Fecha** _____

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Code Compliance Vehicle Inspection

Vehicle 1: Permit # _____

Vehicle 2: Permit # _____

- | | |
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