

## HOULTON POLICE DEPARTMENT



97 Military Street Phone: 207-532-2287 Houlton, ME 04730 Fax: 207-532-1323

	Taxicab Driver Application	
professional profe	□ New □ Renewal	
Name:	DOB :	
Address:	Phone :	
Email:	ME Driver License # :	
	or vehicle currently under suspension? Yes / No	
2. List any past chiminal conviction	ons of indicate more .	
character, past employment, consume state or local files, including those mai purpose of confirming the information material to my qualifications for emplo	artment and/or its agents to make an investigation of my backgrounder reports, education, and criminal history record information which mentained by both public and private organizations, and all public record contained on my application and/or obtaining other information which yment. A telephone facsimile (fax) or xerographic copy of this consensent. I hereby certify that the above statements are true and correct	ay be in any ds, for the n may be nt shall be
Applicant Signature	Print Name	7/11/
Pugingga Namay	Date Taxi Business Information	
Business Name:		
Address:  1. Liability insurance provided?	Yes / No	
	HPD Office Use Only	
☐ Driver License ☐ References (	2)   Background Report   Liability Insurance Certificate	☐ Picture
☐ Background Fee \$50	□ Permit Fee \$50 Total Due \$	
☐ Approved ☐ Denied - Reason _		
Approved/denied by Chief of Police	Date:	
	rdinance and Driver Permit received by Driver Signature/Da	ate