



TAXI VEHICLE LICENSE APPLICATION

**ANNUAL FEE \$13.00 (Per Vehicle)
(January 1 - December 31)**

*******PLEASE PRINT CLEARLY*******

Name of Taxi Business _____

Local Business Contact Name and Telephone _____

Business Address _____

Taxi Vehicle #1

Year _____ Make _____ Model _____

VIN# _____ License Plate # _____

Taxi Vehicle #2

Year _____ Make _____ Model _____

VIN# _____ License Plate # _____

Taxi Vehicle #3

Year _____ Make _____ Model _____

VIN# _____ License Plate # _____

The following forms must be completed and submitted with this application in order to be considered for licensing:

Proof of Insurance Certificate

Certification of Automotive Service Excellence (ASE) Auto Mechanic

APPLICANT'S STATEMENT

I hereby certify that the answers on this application are true and correct to the best of my knowledge. I agree, in consideration of the granting of this license, to comply with the laws of the State of Wisconsin, and to the provisions of the City of Platteville Municipal Code.

Owner or Agent Signature _____ Date _____

Office Use Only:

Date Received: _____ Receipt #: _____ Police Action and Date: A or D _____
Council Action and Date: A or D _____ License #: _____ Date Issued: _____