



**Application for a Taxicab Operator's Permit**

**City of Mentor, Ohio**

(As required by Section 759.02 thru 759.14 of the Mentor Code of Ordinances)

- (a) Attach a list of the make, model and color of each motor car to be used. The state license number of each vehicle. The factory V.I.N. number of each vehicle. The name of the owner of the car as indicated on the Certificate of Title. The seating capacity as originally purchased, and if changed or reconstructed, the seating capacity in its changed form.
- (b) Proof of liability insurance for each taxicab to be operated in the City.
- (c) The name of the drivers who shall operate the motor vehicles, their address, social security number, and operator's license number, *which information shall at all time be kept current.*

**See Attachment A**

- (d) Have any of the persons identified in section (a) been convicted of a crime, misdemeanor, or violation of any municipal ordinance? YES: \_\_\_\_ NO: \_\_\_\_\_. If YES, describe the nature of the offense and punishment assessed therefore:


- (e) At the time of issuance of the taxi cab operator permit, and annually thereafter, on or before the first day of January of each calendar year, every taxicab operator now operating and which shall hereafter operate in the City, shall pay the following fees for each taxicab operated or to be operated by it, to wit: **(a) If placed in operation between January 1 and June 30 of any year, the sum of thirty dollars (\$30.00) per year. (b) If placed in operation after June 30 of any year, the sum of fifteen dollars (\$15.00).** (c) There shall be no refund of license fees paid in the event that any taxicab is taken off the streets and not thereafter operated by said operator during the time for which a license has been issued.
  
- (f) **Each taxicab driver shall pay a license fee of fifteen dollars (\$15.00) for each year. All taxicab drivers, licenses shall expire on December 31<sup>st</sup> of each year.** No person shall drive a taxicab without first having paid the required license fee and received such license. Each licensed operator shall at all times display said license.

**Fees to be submitted with application:**

(a) Taxi Operator Permit X \$30.00 each= \$ \_\_\_\_\_

(b) Additional fee for each Taxi Cab Driver's License  
 \_\_\_\_\_ Drivers X \$15.00 each = \$ \_\_\_\_\_

**TOTAL PERMIT FEE:** \$ \_\_\_\_\_

The applicant hereby applies for a taxi operator's permit and taxi cab driver's license for each person named in Attachment A and swears that the information contained herein is true and correct. The applicant further states that he/she has received and read a copy of Chapter 759 of the Mentor Code of Ordinances and will abide by all regulations established therein.

## Company Information

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Phone Number: \_\_\_\_\_ Company Federal ID # \_\_\_\_\_

Manager / Supervisor: \_\_\_\_\_

Manager / Supervisor Address: \_\_\_\_\_

\_\_\_\_\_

Manager / Supervisor Phone #: \_\_\_\_\_

Printed Name of Applicant \_\_\_\_\_

Applicant Address \_\_\_\_\_

\_\_\_\_\_

Applicant Phone #: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

### **To Be Completed By Mentor Police Records:**

Date of Submittal: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_



# Attachment A

<b>NAME:</b> SSN: DOB: DRIVERS LICENSE #: DRIVER'S LICENSE STATE:	<b>ADDRESS:</b> LOCAL: PERMANENT:	<b>PHONE #:</b> LOCAL: PERMANENT:	<b>PRINT:</b> Office Use Only
<b>NAME:</b> SSN: DOB: DRIVERS LICENSE #: DRIVER'S LICENSE STATE:	<b>ADDRESS:</b> LOCAL: PERMANENT:	<b>PHONE #:</b> LOCAL: PERMANENT:	<b>PRINT:</b> Office Use Only
<b>NAME:</b> SSN: DOB: DRIVERS LICENSE #: DRIVER'S LICENSE STATE:	<b>ADDRESS:</b> LOCAL: PERMANENT:	<b>PHONE #:</b> LOCAL: PERMANENT:	<b>PRINT:</b> Office Use Only
<b>NAME:</b> SSN: DOB: DRIVERS LICENSE #: DRIVER'S LICENSE STATE:	<b>ADDRESS:</b> LOCAL: PERMANENT:	<b>PHONE #:</b> LOCAL: PERMANENT:	<b>PRINT:</b> Office Use Only
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