## CITY OF BURLINGTON APPLICATION FOR CONTRACT VEHICLE DRIVER'S LICENSE

NOTE: Any false statements will result in a denial of license.

Applicant hereby authorizes and consents to the City of Burlington to obtain record information from the Vermont Criminal Information Center, the Vermont Department of Motor Vehicles, and a National Background Check Company per the City of Burlington Vehicles for Hire Ordinance, Section 30-28. Any person, firm, or organization providing information or records in accordance with this authorization including the City of Burlington are released from any and all claims of liability for compliance. Such information will be held in confidence as is permitted by law.

Applicant is applying for a: Contract Driver's License Updated License (transfer)

## APPLICANT INFORMATION

Last Name	First	Middle	
List any aliases			
Physical Address	City	State Zip c	ode
Mailing Address (if different)			
Cell # He	ome phone #	Work phone #	
Email Address	Address Place of Birth		
Height Weight Hair			
Date of Birth Social Note: The Social Security Number will only information will need to be completed as sig	be used to obtain criminal history inj	formation. If applying for an updated	
Applicant's place of residence for five	e (5) years previous to present ac	ldress:	
		Date	<u> </u>
		_	
		Date	
Taxicab or contract business which ap	pplicant is employed or has been	offered conditional employmen	t:
Company	Address		
City State	Zip code	Business phone#	
Note: Except for single vehicle owner-operator of employment with the business licensee, **Signature of Business Owner	ators, a letter is required from the bus	iness owner stating that you are emplo	
Do you have at least two (2) years of	driving experience? 🗌 Yes 🗌	] No	
Have you held a City of Burlington C If yes, state dates and employer			0
Have you previously been denied a C If yes, date(s)			
Do you have any physical or mental i	nfirmities that would impair you	r ability to drive safely or assist	passengers?
Has any driver's license that you have		n suspended or revoked?	

		narges or unresolved		in this or any o	other jurisdiction?
Yes No	If yes, state when	, where and for w	hat offense.		

Have you ever been convicted of a violation of any federal, state, or local law of this or any other jurisdiction and if so,
state when, where and for what offense and the sentence of the court.
□ Yes □ No

Are you required to register as a sex offender?	Yes No			
Are you subject to an Abuse Prevention Order?	Yes No			
Are you addicted to drugs or alcohol?	Yes No			
Are you under the supervision of the Department of Corrections?	Yes No			

## DECLARATION OF APPLICANT

By signing below, you agree to hold the City harmless from any and all claims, demands, damages, causes of actions, and costs, including all costs of litigation, costs of any kind including attorney's fees, arising out of operation or use of a taxicab or other vehicle for hire licensed under this chapter.

You agree to abide by the terms and conditions of the City of Burlington Vehicle for Hire Ordinance and any airport regulations and to comply with all federal, state or local laws.

You acknowledge and agree that:

It is the obligation of a licensed taxicab driver or contract vehicle driver to notify the Taxi Administration Office of any suspension or revocation of his or her Vermont operator's license and to return his or her taxicab driver's license or contract vehicle driver's license to the Taxi Administration Office within five (5) days of such suspension or revocation.

It is a violation of this ordinance for a licensee to continue to use or drive any taxicab or contact vehicle after suspension of his or her Vermont operator's license and the driver may be denied a taxicab driver's license or contract vehicle driver's license for up to 2 years from the date of the finding by the Appeals Panel of such violation by a licensee in addition to any other penalty which may apply under the Vehicle for Hire Ordinance.

Each question and answer and each statement made in the application, or any proof required shall be deemed material.

You hereby certify that all statements made in this application are true and complete, and agree and understand that any misstatements of material facts herein will result in denial of license or revocation of license if one has been granted to you.

Signature of Applicant

Date

TAXI LICENSING OFFICE USE ONLY					
	DMV	Date Received:	License #		
	VCIC	Application Fee paid:	License Fee paid:		
	SSCI ordered	VCIC/SSCI Fee paid:	Issue Date:		
	Consent from employer		Expiration Date: 8/31/2018		