



CAYMAN ISLANDS AIRPORTS AUTHORITY

TAXI OPERATOR APPLICATION

DATE: _____

NAME: _____

ADDRESS: _____

TELEPHONE: _____

PUBLIC SERVICE NUMBER: _____

TYPE OF VEHICLE: _____

REGISTRATION NUMBER: _____

CAPACITY OF VEHICLE: _____

INSURANCE POLICY: _____

NATIONALITY: _____

HOW LONG HAVE YOU OPERATED A TAXI: _____

DO YOU HAVE ANY PREVIOUS TRAFFIC OFFENCES? IF YES, STATE:

REMARKS: _____

NOTES: 1. APPLICANTS MUST BE CAYMANIAN OR HOLD CAYMANIAN STATUS.

2. APPLICANTS MUST HAVE HELD A VALID CAYMAN ISLANDS TAXI DRIVERS LICENCE FOR AT LEAST 12 MONTHS BEFORE BEING CONSIDERED FOR APPROVAL.