



CITY CLERK'S OFFICE
 CITY OF ENGLEWOOD
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 Englewood, NJ 07631
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APPLICATION FOR TAXICAB/ VEHICLE LICENSE

Chapter 393

() New () Renew () Transfer

Date filed: _____

License No. _____

Approved: _____

Telephone # _____

\$25.00 (191-6) Fee paid: _____

Veteran's Papers Submitted: _____

NON-CORPORATE APPLICANT:

Name: _____ Date of Birth: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Length of residence in at this address?: _____ In New Jersey? _____

Can you read and write the English language?: _____

Have you ever been convicted of a crime?: _____ If so, give details: _____

DESCRIPTION OF VEHICLE:

Make: _____ Year: _____

VIN Number: _____

Current NJ Taxicab License Plate Number: _____

Name/Address of Automobile Insurance Co.: _____

* * * * *

I understand that the acceptance of this application and required fee does not guarantee approval.

Fees are non-refundable.

 Signature of Applicant

 Date

(Do Not Write Below This Line)

 Report of the Chief of Police

 Date: _____

PART TWO OF TAXICAB/ PUBLIC HACK LICENSE

QUESTIONS TO BE ANSWER:

ORDINANCE NO. 393-2

SECTION 3 OF ARTICLE 2

Article 2 of Chapter 393 of the General Ordinance of the City of Englewood is hereby amended to add there to the following subparagraphs:

(E) The number of taxicabs owned by the applicant and licensed within the City of Englewood.

_____.

(F) The operating hours and days of the week in which the taxicab will be engaged or otherwise operated.

(G) The name of each and every dispatcher or other person designated to receive the telephone calls from the

public requesting a taxicab. _____

(H) The number of telephone lines and telephone number of each line maintained and operated solely for dispatching purposes. _____

(I) The location of each off-street parking space for each taxicab license hereunder.

Name: _____ Address: _____

Telephone of the Lessor. _____