

ZION POLICE DEPARTMENT

2101 Salem Blvd., Zion, IL 60099 847-872-8000 - Fax 847-746-4093



www.cityofzion.com

TAXI/LIVERY DRIVER APPLICATION

	y for a Taxicab/Liv			in the City o			State of Illinois, and state ad	aver the
following: Type of perr	mit applying for:	New Ta	xicab/Live	rv Permit		Taxica	ab/Livery Permit Renewal	
	NFORMATION:		/ LIVO	.,				
Name:	NFORMATION.							
Current Address:					City:			
State:	State: Zip Code:		Daytime Phone No:			Cell phone No.:		
Social Secu	Social Security No.: Birtl				IL Driver's Exp. Date	Driver's License No.: p. Date:		
Male	Female	Age	Heiç	ght \	Veight	Eye (Color Hair Color	_
Name of Taxicab/Livery Employer: Address of Taxicab/Livery Employe				o/Livery Employer:				
City:	City:		State:			Business Phone No.:		
CRIMINAL H Have you had If the answe	ISTORY: d a valid IL driver's r is "YES" to any	s license	I. for the last	: 3 years? YE uestions, pl	ES NO ease prov	ide a brie	inois Drivers License. Out o	e dates.
Has your driv	ver's license ever b	een susp	pended, re	voked or refu	used? YES	NO _		
Have you be	en arrested or con	victed of	driving und	der the influe	nce in the	past 3 yrs	? YES NO	
Have you be	en arrested or con	victed of	reckless d	riving, in the	past 3 yea	rs? YES	NO	
Have you be	en arrested or con	victed of	a misdeme	eanor within	the last yea	ar? YES	NO	

Have you been convicted of a felony within the last ten years? YES NO ______

violations within the last year? YES NO ______

Do you have any current outstanding moving or non-moving violations? YES NO Have you had two or more moving

SUBMITTALS

In addition to this application form, each applicant shall submit the following to the Zion Police Department:

- 1. \$55.00 non-refundable application fee
- 2. \$10.00 Fingerprinting fee
- 3. Three (3) 2 ½ x 2 ½ photos

BACKGROUND INVESTIGATION

In accordance with the City Ordinance, the City shall investigate the Applicant's criminal history and veracity regarding information on this application. In the event Applicant is made aware that any information or document submitted as part of this application process is inaccurate or incomplete, Applicant agrees to immediately notify the City and provide appropriate corrections and addendums. Applicant understands and agrees to provide such additional information and material, and that his/her failure to do so may delay the processing of this application and/or result in its denial.

If a permit is granted, it shall be valid from January 1 through December 31. If the permit is denied, the application fee shall **not** be returned.

Each January 1, following the date of issuance, the driver shall renew their permit with the city and pay a renewal fee of \$55.00. Upon renewal, the driver shall show proof of a valid driver's license.

Driver's renewing permits will be required to submit to a police background check every three (3) years and will pay the \$10.00 Fingerprinting fee.

Driver's licenses may be periodically checked, without prior notification, to verify permits remain in good standing for the term of the permit. Any violations may be subject to termination of the permit.

I am able to speak, read and write the English language and am not addicted to the use of intoxicating or habit-forming drugs.

ANY FALSE STATEMENT SHALL BE S	UFFICIENT REASON FOR REJECTION OF AN APPLICATION.
Applicant's Signature	Date
♦ If a driver's permit needs to	be replaced for any reason, there will be a \$5.00 fee. ♦

FOR OFFICE USE ONLY

Applicant's Picture (2 ½ x 2 ½)			
	Permit No.: Date: Receipt No.: Issuer: New/Renewal: Effective Date:	Permit No.: Date: Receipt No.: Issuer: New/Renewal: Effective Date:	Permit No.: Date: Receipt No.: Issuer: New/Renewal: Effective Date: