



Total Licence fee \$ \_\_\_\_\_

## Town of Blind River Application for Taxi Cab Driver's Licence

11 Hudson Street, Blind River, Ontario, P0R 1B0

Tel.: (705)356-2251 Fax.: (705)356-7343

Application for:  New Taxicab Driver's Licence  Renewal of Taxicab Driver's Licence

Type of application for:  Taxicab Driver  Limousine Driver  Shuttle Driver

I \_\_\_\_\_, wish to apply for a taxi-cab driver's license for the Town of Blind River.

### *Please Print*

Last Name:	Given Name (s):	D.O.B.:
Address:		
Phone:	Cell:	Fax:
Email:		

New application only - required to be attached:

CRIMINAL RECORD:

YES

LIQUOR ACT RECORD (if applicable):

YES

DRIVER'S RECORD:

YES

I/We \_\_\_\_\_, declare that:

The information contained in this form is true to the best of my knowledge.

Date

Owner

\_\_\_\_\_

Date

\_\_\_\_\_

CAO/Clerk

\_\_\_\_\_

Date

\_\_\_\_\_

By-Law Officer