

**CORTLAND POLICE DEPARTMENT TAXICAB DRIVER'S LICENSE APPLICATION**

APPROVED BY: \_\_\_\_\_ DATE \_\_\_\_\_ LIC # \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ WEIGHT \_\_\_\_\_ HEIGHT \_\_\_\_\_

HAIR COLOR \_\_\_\_\_ EYE COLOR \_\_\_\_\_

DO YOU POSSESS A VALID NYS DRIVERS LICENSE CLASS A, B, CDL C. OR E?

LICENSE # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

HAS YOUR DRIVERS LICENSE EVER BEEN SUSPENDED OR REVOKED? \_\_\_\_\_

IF SO, WHEN \_\_\_\_\_ FOR WHAT REASON \_\_\_\_\_

DO YOU HAVE ANY PRIOR EXPERIENCE IN THE TRANSPORTATION OF PASSENGERS?

IF SO, EXPLAIN \_\_\_\_\_

**GIVE 3 CHARACTER REFERENCES-INCLUDING A SIGNED LETTER FROM EACH**

LAST, FIRST, MI	ADDRESS	PHONE #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**LIST YOUR PLACES OF EMPLOYMENT DURING THE PAST TWO (2) YEARS**

NAME OF FIRM	ADDRESS	SUPERVISOR
_____	_____	_____
_____	_____	_____

HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED OF ANY CRIME OR OFFENSE?

YES \_\_\_ NO \_\_\_ IF YES, PLEASE FURNISH THE FOLLOWING.

DATE	POLICE AGENCY	CHARGE	DISPOSITION/DATE
_____	_____	_____	_____

**TAXI CAB BUSINESS OWNER**

THIS APPLICANT HAS BEEN OFFERED A POSITION WITH \_\_\_\_\_  
PENDING HIS/HER SUCCESSFUL COMPLETION OF QUALIFICATIONS FOR A TAXICAB DRIVER'S  
LICENSE ISSUED BY THE CITY OF CORTLAND.

SIGNATURE OF PROSPECTIVE EMPLOYER \_\_\_\_\_

**THIS AFFIRMATION MUST BE COMPLETED**

I AFFIRM THAT STATEMENTS MADE ON THIS APPLICATION (INCLUDING LETTERS OF EXPLANATION) ARE TRUE UNDER PENALTY OF PERJURY.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

(APPLICANT)

NOTE: WHEN FILLING OUT YOUR APPLICATION FORM, CHECK TO MAKE SURE ALL QUESTIONS HAVE BEEN ANSWERED. AN INCOMPLETE APPLICATION MAY RESULT IN DISAPPROVAL.

CORTLAND POLICE DEPARTMENT  
APPLICATION  
TAXICAB DRIVER'S LICENSE

PHYSICIAN'S VOUCHER

(PHYSICIAN MUST FILL IN APPLICANT'S NAME AND DATE OF EXAMINATION)

NAME \_\_\_\_\_

PHYSICIAN'S VOUCHER

This is to certify that I have personally examined the applicant named above. I find him/her to be of sound physique with good/corrected eyesight and hearing. Also not subject to any infirmity of the body or mind, which might render him/her, unfit for the safe operation of a public cab.

(If physician is unable to certify as above, please state what physical defects the applicant possesses.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHYSICIAN'S NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_

PHONE \_\_\_\_\_

## CORTLAND POLICE DEPARTMENT TAXICAB DRIVERS REQUIREMENTS/INSTRUCTIONS

1. Applications that are torn or soiled will be refused.
2. Applicants must have a thorough knowledge of the taxicab and traffic ordinances of the City of Cortland and of the geography of the City of Cortland. All applicants may be subject to an examination as to their fitness when applying for a license. Failure to answer questions properly will result in the postponement of the issuance of a license, until such time as the applicant may become familiar with the ordinances of the City of Cortland and the various locations of streets within the City.
3. All licenses shall expire at Midnight on March 31<sup>st</sup> each year, unless previously suspended or revoked.
4. The license fee for each license will be **\$50.00** annually and for each renewal thereof.

### **Section 16-13 License Required: qualifications (Municipal Code)**

No person shall operate or drive a taxicab without having in force and effect, a Taxicab Driver's License in accordance with the provisions of this chapter. No person shall be issued a Taxicab Driver's License unless such person:

1. Has first obtained a New York State Chauffeur's License.
2. Is over the age of twenty-one (21) years
3. Is of sound mind and body, with good eyesight and not subject to epilepsy, vertigo, heart disease, or any other infirmity of mind or body, which might render the applicant incapable or unfit to safely operate a taxicab for hire. Each applicant shall produce a physician's certificate dated not more than thirty (30) days prior to the application certifying that the applicant is physically qualified to operate a motor vehicle.
4. Be able to read and write intelligently the English language.
5. Is clean in dress, person and not addicted to intoxicating liquor or use of drugs.
6. Must be of good moral character and reputation.  
A conviction of a felony or any offense involving violence, dishonesty, deceit, indecency, degeneracy, moral turpitude, driving while under the influence of alcohol, or illegal use or possession of drugs may preclude the issuance of a license.

**Any false statement in this application will be sufficient cause for refusal of application or revocation of license.**

I have received, read and understand the operation regulations for taxicab drivers, as they pertain to Section 16-13 of the Municipal Code.

Signature: \_\_\_\_\_