

FORM B – TAXICAB VEHICLE OPERATING LICENSE APPLICATION

Date of application _____

Type of application - Initial _____ Renewal _____ Replacement _____

Vehicle Owner _____ Daytime contact number _____

Address: _____

_____ Postal Code _____

Taxicab Company _____ Telephone number _____

Make _____ Model _____ Year _____

NL Plate # _____ VIN _____

Company Car ID # _____ Town Lic # (Decal) _____

Insurance Company _____ Policy # _____ Expiry date _____

Public Liability and Property Damage Coverage amounts _____

Passenger Liability Coverage amount: _____

Vehicle Inspection date: _____

Owners signature

Date

1/2

A copy of the vehicle registration, insurance certificate and vehicle inspection must accompany this application.

PRESCRIBED FEE: \$40.00

FORM B – TAXICAB VEHICLE OPERATING LICENSE APPLICATION – Continued

FOR TOWN OFFICIAL USE:

Taximeter certification: _____

Registration verified: _____

Inspection verified: _____

Defects observed: _____

Notice to repair issued _____ **Issue Date:** _____

Extension Date: _____ **Report Date:** _____

Payment of fees: _____

All fines paid in full to provincial court offices: _____

Taxicab Company and Stand in good standing with Town: _____

Decal and license issued: _____

COMMENTS/NOTES _____

Approved Not Approved

Inspector: _____ **Date Approved**