

☐ Renewal ☐ New



**Fees:** See page 2 of this application.

## **Taxi/Livery Driver License Application**

### **Municipal Code - Chapter 41**

It shall be unlawful to engage in the business of operating a taxicab or livery vehicle within the city of DeKalb without first having secured a license therefor from the City Council under the provisions of this Chapter. It shall also be unlawful to engage in the business of operating a taxicab or livery vehicle within the city of DeKalb without first lawfully obtaining and installing a taxicab or livery license plate issue by the State of Illinois or the state in which a vehicle is registered, and obtaining a taxicab or livery driver license from the City under the terms of this Ordinance. This Ordinance shall be applicable to any vehicle operated within the City of DeKalb or with trips or routes beginning or ending within the city of DeKalb, without regard to where such vehicle is based or operated from.

**THIS APPLICATION SHOULD BE COMPLETED BY EACH DRIVER OF THE TAXI/LIVERY SERVICE  
INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT**

**Return the ORIGINAL completed application with applicable fees payable to the “City of DeKalb” to:**

City of DeKalb  
Attention: Ruth Scott  
164 E. Lincoln Highway  
DeKalb, Illinois 60115

**Application is hereby made for a Taxi/Livery Driver License for the period of May 1 through April 30.**

<b>Driver Information</b>	
Name:	
Driving for:	
Home Address:	
Phone No.:	
Email Address:	
Social Security #:	
Date of Birth:	
Birth Place:	
Sex:	
Height:	
Weight:	
Hair Color:	
Eye Color:	
* Driver's License #:	
* State:	

**\* A copy of your current and valid driver's license must be attached to this application.**

Provide history of any traffic, ordinance or misdemeanor convictions, including cases on which a plea or finding of guilty was entered in order to obtain court supervision (occurring within the past ten (10) years), and any felony convictions of any kind, at any time.

Do you have any pending traffic citations? *If yes, explain below.* Yes ☐ No ☐

List address(es) (street, city, state, and zip code) for the past five (5) years:

Provide five (5) years history of past employment:

Dates Employed	Employer	Address

List all relevant experience in passenger transportation:

**License Fees**

Application Fee:	\$15.00
Background / Fingerprinting Fee ( <i>New applicants only</i> ):	\$50.00
TOTAL	\$

**Statement**

1. I have not been convicted of an offense involving the unlawful use or possession of a weapon within the preceding ten (10) years.

2. I have not been convicted of an offense involving the unlawful use or possession of any drug or narcotic within the preceding ten (10) years.
3. I have never been convicted of driving under the influence of alcohol, driving while intoxicated or impaired, or any similar charge.
4. I have never been convicted of vehicular homicide or reckless driving.
5. I have never been convicted of any felony involving the unlawful use of a motor vehicle.
6. I have not had my license suspended within the past five (5) years, or had my license suspended more than once in the past ten (10) years.
7. I have never been convicted of a forcible felony, any crime identified in Article 10, 10A, or 11 of the Illinois Criminal Code of 1961, as amended from time to time, or convicted of vehicular endangerment, aggravated or heinous battery of any form, aggravated assault, a hate crime, any form of criminal sexual assault or sexual assault, any form of criminal abuse, child abandonment, any form of prostitution, pandering, pimping or solicitation of a prostitute, or any other criminal act which the City Manager determines, in his absolute and sole discretion, is incompatible with the need to protect the public health, welfare, safety and morals.
8. I have not been required to register, in any form, as a registered sex offender, sexual predator, or other similar sex-offender related status under applicable laws of the State of Illinois.
9. To the extent that the City may be required to disregard certain convictions based upon a Court Order that such conviction be expunged or sealed, the City shall honor such legal obligations.

Any holder of a taxicab or livery driver license who is convicted of any offense required to be disclosed under this Section 41.14 during the term of his or her taxicab or livery license shall be obligated to disclose such conviction to the Chief of Police within two business days; such conviction shall be a basis for the City to terminate, suspend or revoke a taxicab or livery driver license.

**BY SIGNING THIS APPLICATION, YOU ARE STATING YOU ARE IN GOOD PHYSICAL CONDITION AND SHALL NOT HAVE ANY NERVOUS, ORGANIC OR FUNCTIONAL CONDITION OR DISEASE WHICH IS LIKELY TO INTERFERE WITH THE SAFE PERFORMANCE OF YOUR DUTIES AS A DRIVER.**

### **Authorization**

I authorize and empower the DeKalb Police Department to obtain, prepare, use and furnish information concerning my current and former employment, education, credit, general reputation, criminal record, if any, health, driver's license, personal characteristics and mode of living through records, correspondence or personal interviews with neighbors, friends or associates, or others with whom I am acquainted, or who may have knowledge concerning any of the above items.

I hereby authorize all police agencies to reveal, disclose and provide all information concerning police contacts with me. I hereby certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

*(Signature page immediately following)*

**APPLICATIONS MUST BE SIGNED IN THE PRESENCE OF A NOTARY BEFORE BEING SUBMITTED TO THE CITY FOR PROCESSING. A NOTARY WILL REQUIRE THAT YOU PROVIDE A VALID DRIVER'S LICENSE AT THE TIME OF SIGNING.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Notary Public

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public