



Town of Amherstburg

271 Sandwich Street South
Amherstburg, ON N9V 2A5
Tel: 519.736.0012
www.amherstburg.ca

TAXICAB DRIVER APPLICATION

<input type="checkbox"/>	<i>New Application</i>	<input type="checkbox"/>	<i>Renewal Application</i>
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PART A: DRIVER PERSONAL INFORMATION

Full Legal Name:		Given Name(s):	
Street Number	Street Name		
City:		Postal Code:	
Phone Number (HOME)		Phone Number (CELLULAR)	
Other Number		Email Address:	
Driver's Licence No.		PROVINCE: Ontario	
Date of Birth _____ (Month/Day/Year)		Place of Birth: _____ (City/Province)	

PART B: EMPLOYMENT /HISTORY

Currently Employed with (company) _____

Work Tel No. _____

*******READ CAREFULLY BEFORE SIGNING THIS APPLICATION*******

This Application may contain personal information as defined under the Municipal Freedom of Information and Protection of Privacy Act. The information collected is required pursuant to the terms of the Municipal Act and will be used by the Town to process the application, determine issuance of the licence and also for enforcement of the Town's by-law. Questions relating to the collection of this information should be directed to the Clerk at (519) 736-0012. By signing this application, the Applicant agrees that all information provided is true. The Applicant further agrees that any false information may result in the revocation of the licence that may be issued.

Signature of Applicant:

OFFICE USE ONLY

Taxicab Driver's Licence Number Issued: _____

Taxicab Driver Licensing Requirements, as per By-law 2012-114

- Proof of 18 years old (Valid Passport or Birth Certificate)
- Valid Driver's Licence -Class G issued by the Province of Ontario
- Ont Driver's Record from MTO (Driver Abstract) dated not more than 30 days prior application
- An original CIR (Criminal Information Report) dated not more than 30 days prior to application
- Colour Photo Taken by Town of Amherstburg
- Payment of Applicable Fee