

VILLAGE OF MOUNT HOREB
APPLICATION FOR TAXICAB BUSINESS LICENSE

For the period beginning _____ and ending June 30, _____ **Fee: \$35.00 per taxicab**
Is this a new application, renewal or an amendment of a previous application: _____

Full Name _____
Home Address _____
Personal Telephone Number _____ Date of Birth _____
Wisconsin Drivers License Number _____

Taxicab Business Name _____
Taxicab Business Address _____
Taxicab Business Telephone number _____
Liability Insurance Company (*attach certificate of insurance*) _____

Make, Model, Serial Number & License number of vehicle to be used _____

Make, Model, Serial Number & License number of vehicle to be used _____

Make, Model, Serial Number & License number of vehicle to be used _____

Make, Model, Serial Number & License number of vehicle to be used _____

I certify that all information provided on this form is true and correct. I am familiar with the laws, ordinances and regulations and I hereby agree, if granted said license, to obey all provisions of said laws. I hereby authorize employees of the Village of Mt. Horeb to obtain information and records from law enforcement agencies, or other sources, to verify the information contained in this application.

Subscribed and sworn to before me
this ____ day of _____, _____

Village Clerk or Notary Public My commission expires _____

VEHICLE INSPECTION DATE _____ (*attach a copy of the inspection certificate*)

INSPECTION FEE PAID: \$ _____ RECEIPT# _____
(Inspection administrative fee of \$25.00 per vehicle plus additional inspection cost, if any)

LICENSE FEE DUE: _____ vehicles @ \$35.00 per taxicab = \$ _____

RECEIPT#: _____ LICENSE# _____