## CITY OF MENOMONIE Application to operate TAXI CABS and/or VEHICLES FOR HIRE

Date of Application License period ending June 30, 20		od ending June 30, 20
ТО ТН	E COUNCIL OF THE CITY OF	MENOMONIE:
I certify to the following:		
Corporate Name	_	
Business / Trade Name		
Applicant's Name		Date of birth:
Applicant's Address		
Applicant phone number	Email address	
List vehicles to be operated unde	er this application:	
Year and make of vehicle	Vehicle ID number	License plate number
•	•	ne City of Menomonie or any other city?
		ity of Menomonie ordinances or statutes of
	e and/or conviction and the place wh	
< Name of Insurance Company:		
(Certificate of Insurance mus	st be filed with the clerk - \$1,000,00	00 liability insurance)
taxi cab / vehicle for hire license to with full understanding that the inf	the licensing authorities of the City	ormation pertaining to my application for a of Menomonie. This release is authorized st unauthorized disclosure to any party not iness of the City of Menomonie.
I hereby release the City of Menom to me on account of compliance w		n any liability for damages which may result
	Signature of A	Applicant
Fee \$25.00 for each vehicle + \$10.00 (Number of vehiclesCode #		
Total Fee Paid: Ro	eceipt Number:	_
For Office Use:		(circle one)
Date Investigation Complete: Initials of Records Technician (o O.k. for Clerk to issue license		
Signature of Police Chief (or des	ignated staff officer)	