

**APPLICATION FOR TAXI OR LIMOUSINE PERMIT
CHAMBLEE POLICE DEPARTMENT**

The undersigned respectfully requests the issuance of a permit to work as a taxi or limousine driver.

NAME: _____ AGE: _____ DATE: _____

DATE OF BIRTH: _____ SEX: _____ RACE: _____ SOCIAL SECURITY NO: _____

ADDRESS: _____

COLOR OF EYES: _____ HAIR: _____ WEIGHT: _____ HEIGHT: _____

GEORGIA DRIVER'S LICENSE NO: _____ PLACE OF BIRTH: _____

ARE YOU A U.S. CITIZEN? _____ IF NOT, GIVE ALIEN REGISTRATION NO: _____

MARITAL STATUS: _____ SPOUSE'S NAME: _____

LIST EMPLOYERS AND ADDRESSES FOR PAST 5 YEARS: _____

LIST RESIDENCE ADDRESSES FOR PAST 5 YEARS: _____

HAVE YOU EVER BEEN ARRESTED? _____ IF YES, FOR WHAT: _____

WHEN: _____ WHERE: _____

DISPOSITION OF CASE: _____

HAVE YOU EVER BEEN ISSUED A SIMILAR PERMIT WITH ANY AGENCY: _____ IF YES, WHERE AND WHEN?

HAVE YOU EVER APPLIED FOR AND BEEN REFUSED A SIMILAR PERMIT WITH ANY AGENCY: _____ IF YES,

WHAT AGENCY AND WHEN: _____

NAME OF TAXI COMPANY: _____

ADDRESS: (MUST BE IN DEKALB COUNTY) : _____

INSURANCE COMPANY: _____ POLICY NO: _____

I DO HEREBY SWEAR (OR AFFIRM) THAT THE ANSWERS GIVEN HEREIN ARE TRUE AND CORRECT. I ALSO AUTHORIZE THE CITY OF CHAMBLEE POLICE DEPARTMENT TO RECEIVE ANY CRIMINAL HISTORY RECORD INFORMATION PERTAINING TO ME WHICH MAY BE IN THE FILES OF ANY STATE OR LOCAL CRIMINAL JUSTICE AGENCY IN GEORGIA.

APPLICANT'S SIGNATURE

FOR DEPARTMENT USE ONLY		
DATE APPROVED:	PERMIT # ISSUED:	BY: