

TOWN OF WOODSTOCK
APPLICATION FOR TAXICAB OWNER LICENSE

I, _____, being the owner of a motor vehicle described as follows:

Date of Birth: _____

Vehicle Serial Number: _____

Year: _____ Make: _____ Model: _____

License No.: _____

Motor Vehicle Inspection No.: _____

Date of Last Inspection: _____ Within One Month? _____

Insurance Policy No. _____ Amount _____

Insurance Agent _____

make application to the Chief of Police for a taxicab owner license. My taxicab will be operated from the following address: _____

SIGNATURE OF APPLICANT:

This certifies that the above mentioned motor vehicle is suitable for use as a taxicab, and recommends this applicant for a taxicab license.

POLICE CHIEF:

This certifies that the address from which it is stated that the taxi business will be operated is in the zone allowed by the zoning By-Law.

DEVELOPMENT OFFICER:

Date of Issue _____

Term of License - From _____ To _____

Number of Taxicabs operated by applicant _____

DIRECTOR OF ADMINISTRATIVE SERVICES

Return completed forms to:

Town of Woodstock
824 Main Street
Woodstock, New Brunswick
E7M 2E8

Or they can be faxed to: (506) 325-4308

Les formulaires dûment remplis devraient être retournés à l'adresse suivante :

Ville de Woodstock
824 rue Main
Woodstock, Nouveau-Brunswick
E7M 2E8

ou être faxés au : (506) 325-4308