CITY OF AUBURN, AL	
VEHICLE FOR HIRE APPL	ICATION

For City of Auburn Staff use only:		
Customer #	_ Zoning ApprovalYes No	
Home Occupancy Permit #		

SECTION 4	D		
SECTION 1	RUSINESS	INFORM	Δ II()N

PRINT NAME

	Corporation □ Partnership Limited Liability Company (LL0	□ Individual or Sole Pro C) (Single Member) □ L			artnershin (LLP)
First Day Business Activities			innited Elability Con	npany (LLC) (M	
	Will Begin in Auburn:	(Month)	(Day)	(Year)
Physical Location of Busines	S:				
•	Street Address		City	State	Zip Code
Will vehicle(s) be garaged at	this location?YesNo	o If no, provide address v	where vehicle(s) wil	l be garaged.	
be issued. If physical locat	of business is in the city lin ion is a residence located in ent [171 N Ross St, Auburn,	n city limits of Auburn, a			
Mailing Address, if Different:	Street Address or PO Box		City	State	Zip Code
Phone #	Fax #	Website:	•		·
OWNER/PARTNER INFORM	IATION (Person(s) legally resp	ponsible for business) (At	tach a separate she	eet if necessary	/)
	N <u>MUST</u> BE COMPLETED BY <u>A</u>				,
Name:			Title:		
Home Address:			(City),	(State)	,(Zip)
Business Phone #	Alternative Phone # _	Fax #	Em	nail	
SSN· DO	DB: DL#/	STATE:			
					-#:
Please provide a legible co	py of the driver's license or	state-issued identification	on card for each o	wner/partner/	officer.
STATE OF ALABAMA					
COUNTY OF LEE	00 04 -f th - Odf Ab	Alabana	- 11	da fan bina duiwa	
operations of said vehicles or	on 23-31 of the Code of Auburn the streets of the City of Aub	ourn, I heareby make appli	ication to the City o		
Municipal Vehicle for Hire Bu	siness License and upon oath	make the following stater	ments:		
	f Current Vehicle Registrations				
installed and operational	vehicle(s) to be in mechanica	ally sound condition and to	nave all legally red	quired safety ed	quipment
o I have attaced a copy of	the Certificate of Insurance iss				
	ency's contact information (Nation indicated in the least minimum indicated in the least mini				
	rtner(s) responsibility under th . Any lapse of insurance cove f this license.				
immediate invalidation of					

NOTE: All drivers, including owner(s) of business if he/she is a driver, must complete SECTION 2

SIGNATURE OF APPLICANT and DATE

SECTION 2: DRIVER INFORMATION City State Zip Code Home Address Will you garage (keep) the vehicle at this address? Yes No If so, a Home Occupation Permit must be obtain from the Planning Department [171 N Ross St, Auburn, AL] and Section 2 on Page 3 must be completed. _____ DOB: _____ DOB: _____ DL#/STATE: _____ Phone # _____ Alternative Phone # SECTION 2A: EMPLOYER INFORMATION (Provide the employer name, address, and phone number.) Address: City State Street Address Zip Code Phone # _____ Fax # _____ STATE OF ALABAMA—COUNTY OF LEE Under the provisions of Section 23-31 of the Code of Auburn, Alabama, regulating the licensing of vehicle for hire drivers, and the operations of said vehicles on the streets of the City of Auburn, I hereby make application to the City of Auburn, Alabama, for a Municipal Vehicle for Hire Business License and upon oath make the following statements: I am physically and mentally able to safely operate a motor vehicle with no restrictions which cannot be reasonably and legally accomodated. ___years of age and my date of birth is ____/__ 0 I have had _____ years experience in operating automobiles. 0 I am familiar with the ordinances of the City governing the use and operations of vehicles, vehicles for hire, and the use of public 0 streets. I have attached a copy of my current vehicle operator's license (driver's license) to this application. I have attached certified copies of my official Criminal and Driving/Accident Histories obtained through the Alabama Criminal Justice Information Center—Information Integrity Division and the Alabama Department of Public Safety. I understand that crimes or moral turpitude, crimes involving recklessness, and serious driving infractions/accidents may cause my application for this license to be denied. I have attached two passport sized photos taken within sixty (60) days of the application. Under penalties of perjury, I declare that I have examined this form and to best of my knowledge and belief, it is true, correct, and complete. My signature indicates that I take full responsibility for the information presented on this form and any tax liability that might occur. PRINT NAME SIGNATURE OF APPLICANT and DATE LICENESE FEES: \$105 (Start Date Jan 1st – Jun 30th) or \$55 (Start Date Jul 1st – Dec 31st). Licenses expire on **Dec 31st** and are renewable between **Jan 2nd – Feb 15th**. If renewed after **Feb 15th**, a 15% penalty will be added. If renewed after **Mar 15th** (30-days after delinquent date), a 30% penalty plus 1% interest for each month delinquent will be added. PAYMENT OPTIONS: Cash, Check, Money Order, or Credit Card (Visa/MasterCard ONLY) Credit card payments may be made in person at the Revenue Office or by phone by calling (334) 501-7239. To process a phone payment, a copy of the registration form and applicable documents must be faxed to (334) 501-7297. Approved Denied (Circle One) (Chief of Police Signature and Date) Denied (Circle One) Approved (City Manager Signature and Date)

CITY OF AUBURN CODES/PLANNING BUSINESS LICENSE APPROVAL

All new business license applicants locating inside the city limits of Auburn must have this form completed before a business license will be issued by the Revenue Office.

APPLICANT INFORMATON (To be completed by app	olicant)		
Name of Business			
Date business activities will begin in Auburn			
Describe business activity in Auburn			
Physical Address of Business	t, complete Section 3 .		
Contact Name	Contact Number		
Signature of Applicant	Date		
SECTION 1: HUMAN RESOURCES-RISK MANAGEI (To Be Completed by Risk Management Division)	MENT DIVISION (130 Tichenor Ave · Auburn, AL · (334) 501	-7240)	
Does the policy meet the minimum liability limits set by Section	tion 23-16 of the Code of City of Auburn? Yes No		
Does the policy include an endorsement listing the City of Au	Auburn as a certificate holder? Yes No		
Signature of Risk Manager or his/her designee	Date		
Comments			
SECTION 2: PLANNING DEPARTMENT (171 N Ros (To Be Completed by Planning Department) Is this a residence? Yes No If Yes: Home Occupation Permit #	Date Issued		
Is this a commercial property? Yes No	Zone Approved: Yes No		
Signature of Planning Official	Date		
Comments			
SECTION 3: CODES DEPARTMENT (171 N Ross St (To Be Completed by Codes Department)	t · Auburn, AL · (334) 501- 3170)		
Is a Life/Fire/Safety Inspection required? Yes No	If Yes: Date Passed		
Signature of Building Inspector	Date		
Is a Certificate of Occupancy required? Yes No	If Yes: Date Issued		
Signature of Building Inspector	Date		
Comments			