November 2017

To: All Holders of Town Of Greenburgh Taxicab License

Enclosed is your application for a 2018 Taxicab License, as well as instructions.

Please remember that your 2017 Taxicab License expires this December 31st. Therefore, it is necessary that you complete and return a new application, along with the $100 non-refundable fee to the Town Clerk’s Office prior to December 31, 2017.

After submitting the application and payment to the Town Clerk’s Office, if you were not fingerprinted for the 2017 license, you will need to be fingerprinted for next year’s license.

If you have any questions, please do not hesitate to call our office at 914.989.1500, Ext 5.

Sincerely,

Judith A. Beville
Town Clerk

JAB:cp

Encl.
INSTRUCTIONS FOR TAXICAB LICENSE APPLICATION

1. No individual may drive a Taxicab in the Town of Greenburgh until he/she has a Taxicab License issued and in hand by the Town Clerk’s Office.

2. The license expires on December 31st of the year issued.

3. Applicant’s signature must be notarized.

4. Return completed application, with proof of insurance liability coverage of at least $25,000 per person and $50,000 per accident and property damage coverage of $10,000 per accident, a copy of the driver’s license and the application non-refundable fee of $100, if paid prior to January 1st of the year. There is an additional non-refundable $10 fee for every month thereafter the fee has not been paid for renewal of the license. Payment should be made to the Town Clerk’s Office at Town Hall, 177 Hillside Avenue, Greenburgh, NY 10607. The applicant will receive a receipt when the application is accepted by the Town Clerk’s Office.

5. Each applicant must have fingerprints, please contact them at 1-877-472-6915 to make an appointment. The following non-refundable fees must be paid at that time: a money order/check for $85.75 which should be payable to L 1 Enrollment and given to the Fingerprinting Department. The ORI # for Town of Greenburgh is NY0595300.

6. The applicant must know the Taxi Company that he/she will be working for before the Taxicab License is issued. This information will appear on the license.

7. Each applicant must reapply each year with the Town Clerk’s Office. However, he/she will only need to be fingerprinted every other year.

8. All Taxicab vehicles must be inspected twice a year by the Town of Greenburgh Inspection Department. The second inspection must be filed with the Town Clerk within 5 days.

P.S. Please note that the insurance requirements were updated in 2008. The Town Board voted unanimously to pass the Local Law at their meeting of July 9, 2008. Each taxicab applicant has to attach proof of insurance with the application.

In addition, a resolution was passed on September 24, 2008 amending the Fee Schedule relative to Section §450 of the Town Code. The amended fee schedule went into effect as of September 25, 2008.

If any information that is on your license changes during the year (Taxi company you are working for, your name/address etc. you must come into the Town Clerk’s office to advise us and be issued a replacement license.)
$100.00 per vehicle Non-refundable application fee. False replies to any of the questions herein, under the law, constitutes perjury; detection of such falsity will result in refusal of license, or, if granted, in revocation of same. (Please attach proof of insurance with the application.)

PLEASE PRINT AND COMPLETE ALL INFORMATION

Vehicle Owner’s Personal Information

Full Name: ____________________________
  (Last)  (First)  (Middle)

Home Address: __________________________
  (Street Address)  (City)  (State)  (Zip)

(P.O. Box Address, if applicable) (City) (State) (Zip)

Social Security No.: __________________________
  (Home Tel. No.)  (Cell No.)  E-mail: __________________________
  Date of Birth: __________________________  Age: __________

Business Address

Business Name: __________________________
  Tel. # __________________________

Address: __________________________
  (Street Address)  (City)  (State)  (Zip)

Are you the owner of the taxicab business? No _____ Yes _____ If no, you must attach a “Dispatch Agreement”.

New York Motorist ID# __________________________  Expiration Date __________________________

Have you been previously licensed to operate a taxicab? No _____ Yes _____ If yes, where? __________________________

Were your previous licenses ever revoked? No _____ Yes _____ or suspended? No _____ Yes _____

If yes, for what cause…

________________________________________________________________________
________________________________________________________________________
TOWN OF GREENBURGH
APPLICATION FOR TAXICAB LICENSE

Insurance Information
Provide the following information for all vehicles: (Please attach proof of Insurance)

Insurance Co.: ___________________________ Policy # ___________________ Expires: ____________
Type of Coverage: ___________________________ Amounts: ___________________________

Business Information
If a corporation: Date Incorporated __________ State Incorporated _______ No. of Officers in Corp. _______
Number of persons who will manage the business ________________

For each officer of the Corporation, give the following information (attach additional sheets of papers if necessary):

Name: ____________________________
First Middle Last
Address: ____________________________
Street Address City State Zip
Date of Birth: ___________________________ Social Security # ___________________________
Month Day Year

Has any member of the corporation, partnership, or manager ever been convicted of a felony or crime involving violence, dishonesty, deceit, indecency, degeneracy, gambling, moral turpitude or the illegal use, sale, or possession of drugs? No ______ Yes ______

If yes, state facts below; if necessary, attach additional sheets of paper.

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Revised 2/26/15
TOWN OF GREENBURGH
APPLICATION FOR TAXICAB LICENSE

1. **Please note: Taxicab owners must be fingerprinted every 2 years. Please contact them at 1-877-472-6915 to make an appointment.** The applicant must present the receipt from the Town Clerk’s Office when he/she goes for fingerprinting. The following non-refundable fees must be paid at that time: a **money order/check for $85.75** in favor of L 1 Enrollment to the Fingerprinting Department. **The ORI # for Town of Greenburgh is NY0595300.**

I swear or affirm that all the foregoing answers to the foregoing questions and statements are true and correct to the best of my knowledge.

________________________________________
Applicant’s Signature

STATE OF NEW YORK
COUNTY OF ____________________________

________________________________________ being duly sworn, deposes and says that he/she is the individual making the foregoing application for a taxicab driver’s license; that the answers to the foregoing questions and other statements contained herein are true of his/her own knowledge.

Sworn to before me this ______ day of __________________, ______.

________________________________________
Signature of Notary Public or Commissioner of Deeds
I, _____________________________________, an independent owner/operator of a taxicab, hereby state and affirm under penalties of perjury as follows:

a) I am an independent contractor who has entered into a dispatch agreement with ______________________________ as Dispatcher in order to operate a taxicab within the Town of Greenburgh.

b) Under such dispatch agreement, ______________________________ (Taxic Co.) will provide taxi calls to me, and process and disperse funds for credit cards and house charges. I am to pay a fee to ______________________________ (Taxic Co.), for such dispatching in order to operate my taxicab under ______________________________ (Taxic Co.) license within the Town of Greenburgh.

c) I understand and affirm that I will not solicit any new or existing patrons for anyone other than ______________________________ (Taxic Co.) in the Town of Greenburgh during the licensing period, and understand that my license to operate a taxicab within the Town of Greenburgh is solely predicated under the ______________________________ (Taxic Co.) license.

d) I affirmatively state that my taxi will be painted ______________________________ (Taxic Co.) colors and lettered according to the Town of Greenburgh guidelines. In the event that the dispatch agreement is terminated, I will remove the lettering and cease to operate within the Town of Greenburgh.

e) All insurance premiums and policies for my taxi must be obtained and kept by me as owner of the vehicle, naming ______________________________ (Taxic Co.) as an additional insured on the policy.

f) In the event of an accident or any other event causing personal injury or damage, I will supply a copy of my insurance and ______________________________ Insurance to the claimant.

(Taxic Co.)

(g) I state that my vehicle will be kept in good and safe working condition and will operate in accordance with all applicable state, local and town laws, rules and regulations, as well as conformity with the dispatch agreement.

(h) In the event that the dispatch agreement is terminated, my Town of Greenburgh license to operate and drive a taxicab shall become null and void, and of no future force and effect. My licenses must be personally turned in to and delivered to the Town Clerk’s office of the Town of Greenburgh by me by the next business day after the dispatch agreement is terminated.

I have made the foregoing statements to induce the Town of Greenburgh to permit me to operate a taxicab within the Town of Greenburgh under the license held by ______________________________ (Taxic Co.).

______________________________
Name of Owner/Operator (Print)

______________________________
Signature

Sworn to before me

This ______ day of ________ 20____

______________________________
Notary Public
**Part I: (To Be Completed By Applicant)**

Name_________________________ Phone_________________________

Address____________________________________________________

V.I.N. #____________________ Plate #__________________ Color____________________

Type________________ Mileage________ Year________ Make____________________

Cab #____________ State Registration #__________________ Seating Capacity________

**Part II: Proof of New York State Inspection: Sticker # ________________

(State Inspection Expiration Date)______________________________

**Part III: (To Be Completed By Town Inspector)**

Non-Removable Taxi & Municipal markings On Car (the word “Taxi” MUST be part of the markings)

Left Side________________ Right Side________________ Trunk Lid____________________

Wipers________________________ Mirrors_______________________

Horn_________________________ Headlights__________________

Tail Lights____________________ Stop Lights__________________

Signal Lights__________________ Emergency Flashers__________________

Glass Condition________________ Passenger Seatbelts__________________

Cleanliness: Exterior_________________ Interior____________________

Damage: Exterior________________ Interior____________________

**New York State Safety Inspection must be valid at the time of inspection by Town of Greenburgh Inspection Department. Additional Town of Greenburgh Inspection required six (6) months later and this application must be filed with the Town Clerk within 5 days.**

Inspected By_________________________________________ Date________________________