## **ERWIN, TENNESSEE APPLICATION/RENEWAL**

## FOR PERMIT TO OPERATE A VEHICLE FOR HIRE

| DATE                        |   |
|-----------------------------|---|
| NAME                        |   |
| ADDRESS                     |   |
|                             |   |
| AGE                         | DATE OF BIRTH                                     |
| SOCIAL SECUR                | AITY NUMBER                                       |
| LENGTH AT CU                | JRRENT ADDRESS                                    |
| HOME TELEPH                 | ONE NUMBER  |
| WORK                        |   |
|                             | COMMERCIAL DRIVER'S LICENSE NUMBER                |
| LIST EXPERIEN<br>NECESSARY) | ICE IN TRANSPORTATION OF PASSENGERS (ADD SHEET IF |
| 1                           |   |
| 2.                          |   |
| 3.                          |   |
| HISTORY OF E                | MPLOYMENT (ADD SHEET IF NECESSARY)                |
| 1                           |   |
| 2.                          |   |
| 3.                          |   |
|                             |   |

IF YES, DESCRIBE:

NAME OF COMPANY WHERE CURRENTLY EMPLOYED:

EMPLOYMENT ADDRESS:

APPLICANT AFFIRMS THAT HE/SHE HAS NOT BEEN CONVICTED OF A VIOLATION OF ANY STATUTE, ORDINANCE, RULE, OR REGULATION AGAINST VEHICLE FOR HIRE OPERATORS, OR COMMITTED ANY CRIME INVOLVING MORAL TURPITUDE, EXCEPT AS STATED ABOVE.

APPLICANT CONSENTS TO BE INVESTIGATED BY MUNICIPAL, COUNTY, STATE, OR FEDERAL LAW ENFORCEMENT AGENCIES CONCERNING INFORMATION PRESENTED IN THIS APPLICATION AND THE CERTIFICATE OF NECESSITY.

APPLICANT AGREES TO PROVIDE SUCH ADDITIONAL INFORMATION AS MAY BE REQUIRED BY THE CITY TO FULLY INVESTIGATE THIS APPLICATION AND THE CERTIFICATE OF NECESSITY.

STATE OF TENNESSEE

COUNTY OF WASHINGTON

\_\_\_\_\_, being duly sworn,

Name of Applicant

makes oath that the statements of fact and affirmations given in the foregoing applications are true.

(signature of applicant)

SWORN TO AND SUBSCRIBED before me, \_\_\_\_\_

this \_\_\_\_\_\_, 20\_\_\_\_\_,

## NOTARY PUBLIC

My Commission expires:

DATE APPROVED/DISAPPROVED BY CHIEF OF POLICE:

\_\_\_\_\_

\_\_\_\_\_

SIGNED\_\_\_\_\_

CHIEF OF POLICE

DATE APPROVED/DISAPPROVED BY CITY RECORDER:

SIGNED\_\_\_\_\_

CITY RECORDER

CONDITIONS:

DATE CONDITIONS SATISFIED:

SIGNED:\_\_\_\_\_CITY RECORDER