

# Southern Pines Police Department

## Application for Business License as a Taxicab Agency

The Southern Pines Police Department will review, process and, if appropriate, authorize the issuance of a Business License for a taxicab agency to conduct business in the Town of Southern Pines. For the Southern Pines Police Department to process your application please submit the following documents:

- This completed application
- Photocopy of North Carolina Vehicle Registration for all vehicles intended to be used as a taxicab
- Photocopy of government issued identification card (Driver License, Passport, Military ID, etc.)
- Proof of financial liability insurance for all vehicles intended to be used as a taxicab
- Town of Southern Pines Application for a Business License

### Applicant Information

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Street Address: \_\_\_\_\_

Relationship to Business (i.e. Owner, Operator, Driver, etc.): \_\_\_\_\_

### Business Information

Taxicab Agency Name: \_\_\_\_\_

Address (not PO Box): \_\_\_\_\_

Telephone: Day: \_\_\_\_\_ After Hours: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owner's Home Phone: \_\_\_\_\_

Agency Manager (if any): \_\_\_\_\_

### Taxicab Information

Total number of taxicabs owned/operated by agency: \_\_\_\_\_

Type: \_\_\_\_\_ Vehicle \_\_\_\_\_ Horse-Drawn \_\_\_\_\_ Pedi-cab \_\_\_\_\_ Other

#### Taxicab #1

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Agency Number: \_\_\_\_\_

License Plate: \_\_\_\_\_ "For Hire" tags?  Yes  No

VIN: \_\_\_\_\_

#### Taxicab #2

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Agency Number: \_\_\_\_\_

License Plate: \_\_\_\_\_ "For Hire" tags?  Yes  No

VIN: \_\_\_\_\_

(NOTE: If more than two (2) taxicabs, add additional sheets)

### Liability Insurance

Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Policy Dates: \_\_\_\_\_ Coverage Limits: \_\_\_\_\_

Does the policy cover all vehicles intended to be used by the agency as a taxicab?:  Yes  No

**Certification**

As the applicant for a Permit under Chapter 115 of the Code of Ordinances of the Town of Southern Pines, by signing this application I hereby certify that I am aware of the Code of Ordinances and agree to abide by all provisions stated therein, including an initial and annual inspection to be conducted of my business, vehicles and all other aspects as required by Chapter 115. I agree to update the Southern Pines Police Department within 48 hours if any information in this application changes.

**Release**

I am submitting the application as defined above. I agree to allow a background investigation, including a criminal history check, to be made for purposes of processing my application and for any inspections, annual reviews or administrative purposes relating to my application, license or permit and I certify that the information contained herein and in the application and supporting documents (if any) is true and accurate to the best of my knowledge.

Name - PRINTED	Signature
Witness (SPPD)	Date of Release

**FOR DEPARTMENT USE ONLY**

Date Application received: \_\_\_\_\_ By: \_\_\_\_\_  
(NOTE: All applications are to be forwarded to the Taxi Inspector)

Accepted  Returned - Deficiency \_\_\_\_\_

**Taxicab Inspector**

Recommend Approval  Do Not Recommend Approval

Signature	Rank	Date
Comments: _____		

Is the taxi agency in compliance with all requirements of GO 804, TOSP Ordinances and NCGS?  Yes  No

**Review by Operations Captain**

Recommend Approval  Do Not Recommend Approval

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Comments: \_\_\_\_\_

**Review by Chief of Police**

Approved  Not Approved

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Comments: \_\_\_\_\_