

**NORTH KANSAS CITY POLICE
2020 HOWELL STREET
NORTH KANSAS CITY, MO 64116**

Office Use Only
Permit # _____
Approved by: _____
Rejected by: _____
Date: _____

Application for Taxi Cab Driver's Permit

(Please complete all fields)

Note: For all new applicants, a certification of your good character from two reputable citizens who have known you personally for at least six months preceding the date of this application (signed and dated), a copy of a physical examination completed within the last two years, a valid chauffeur's license and completion of this application are required to obtain your taxi permit. The cost for a taxi permit is \$30.00. Permits are valid for two years. Taxi permits may be obtained Monday through Friday, 8:00 a.m. to 1:00 p.m. and 1:30 p.m. to 4:30 p.m.

CURRENT DATE _____

FIRST NAME _____ M.I. _____ LAST NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PREVIOUS ADDRESS and how long (if current address is less than two years):

PHONE: RESIDENCE _____ CELL _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

PHYSICAL DESCRIPTION: MALE _____ FEMALE _____ HEIGHT _____ WEIGHT _____

HAIR COLOR _____ EYE COLOR _____

RACE _____ NATIONALITY _____

CITIZENSHIP: USA _____ OTHER _____

DATE AND PLACE OF NATURALIZATION: _____

MARITAL STATUS: MARRIED _____ SINGLE _____ DIVORCED _____ SEPARATED _____

PLACE OF EMPLOYMENT _____

HAVE YOU BEEN ISSUED A PERMIT IN OUR CITY BEFORE: YES _____ NO _____

IF SO, PERMIT NUMBER AND DATE OF ISSUANCE _____

HAVE YOU BEEN GRANTED A TAXI PERMIT OR LICENSE IN ANOTHER CITY OR STATE? YES _____ NO _____

IF YES, WHERE? _____

HAVE YOU EVER HAD A PERMIT OR CHAUFFEUR'S LICENSE REVOKED: YES _____ NO _____

IF YES, EXPLAIN _____

HAVE YOU EVER BEEN FOUND GUILTY IN ANY COURT IN THE UNITED STATES FOR ANY OFFENSE FOR WHICH YOU SERVED TIME, RECEIVED A SUSPENDED SENTENCE, WERE PLACED ON PROBATION, OR PAID A FINE? THIS IS TO INCLUDE TRAFFIC VIOLATIONS. YES _____ NO _____

IF YES, EXPLAIN _____

AS A CONDITION TO RECEIVING A TAXICAB DRIVER'S PERMIT FROM NORTH KANSAS CITY, MO, DO YOU HEREBY AUTHORIZE THE POLICE DEPARTMENT TO RUN A BACKGROUND/CRIMINAL CHECK ON YOU? YES _____ NO _____

PRINT NAME _____

SIGNATURE _____