

## **Cloverdale Police Department**

112 Broad Street

Cloverdale, CA 95425

• Phone: (707) 894-2150

Fax: (707) 894-5203

## TAXICAB DRIVER'S PERMIT CITY OF CLOVERDALE

## INSTRUCTIONS FOR OBTAINING A TAXI CAB PERMIT

- 1. **Complete a Taxi Driver' Permit application form**. Forms are available at the Cloverdale Police Department.
- 2. Make appointment for Live Scan Fingerprints by contacting the Cloverdale Police Department's Community Service Officer, Teresa McDonald.
- 3. Take the following to the Cloverdale Police Records Department, 112 Broad Street, Cloverdale, CA 95425
  - ✓ Completed and signed application (All information MUST be completed).
  - ✓ Copy of California Driver's License.
  - ✓ Color passport photo
  - ✓ Check or cash in the amount of \$200.00. (Includes administrative fee, \$32.00 DOJ fingerprint fee).
  - ✓ If you would like Cloverdale Police Department to do your fingerprinting, there is an additional \$42.00 fingerprint fee).
- 4. It will take approximately 5 days to process the application after all required papers have been submitted.

Taxi cab driver's permits are issued on an annual basis. Licensees desiring the renewal of their license must apply for renewal 30 days immediately preceding the expiration of their current license. *A new application must be submitted every year*, however, fingerprinting and fingerprint fees are not required for renewal.

A copy of the City of Cloverdale ordinances 5.40.120, 5.40.140 and 5.40.150 pertaining to the issuance of the taxi cab driver permit is included. All parts of this ordinance **must** be met for issuance of the license.

## CLOVERDALE POLICE DEPARTMENT TAXI DRIVER'S PERMIT APPLICATION

NEW RENEWAL		
NAME:	AGE: DATE OF BIRTH	
ADDRESS:		
CITY:	STATE:ZIP:	
PHONE: ( )		
(Circle one) SEX: M F RACE:	HEIGHT:WEIGHT:	EYES:
HAIR:	SS#:	
BIRTHPLACE (City) (State) (Country)		<del></del>
Drivers License #:	State Expiration Date:	
Have you ever been convicted of a felon	y or a misdemeanor? Yes No	
If yes, fully state the nature of the offense	e:	
NAME OF TAXICAB COMPANY:		
ADDRESS:	PHONE: ( )	
Prior Employers name and address:		
Previous home address:		

SIGNING THIS APPLICATION GIVES THE CITY PERMISSION TO RUN AND CHARGE FOR A BACKGROUND INVESTIGATION ON APPLICANT.

I hereby certify that the above statements made by myself and constituting a part of this application are true and correct to the best of my knowledge and belief.		
Signature of Applicant	Date	
FOR OFFICE USE ONL		
COMPLETE SET OF FIN	ERPRINTS: CALIFORNIA DRIVERS LICENSE	
VERIFIED: YES1	)	
PHOTOGRAPH:	BACKGROUND CHECK	
	on available to me and finding no grounds to deny this application Municipal Code, I have no objections to the issuance of a taxi named person.	
Chief of Police	Date	