



# HUTCHINSON

A CITY ON PURPOSE.

111 Hassan Street Southeast  
Hutchinson, MN 55350  
(320) 587-5151 Fax: (320) 234-4240

**License Fee: \$6.00 per taxi**

**Number of taxi(s):** \_\_\_\_\_

**Operating Year:** \_\_\_\_\_

## **City of Hutchinson Application for Taxi Service License (Under Ordinance No. 115)**

### **Business Information**

*Business Name*

*Phone Number*

*Address*

*City*

*State*

*Zip*

*Manager/Owner*

### **Checklist**

The following items need to be completed and/or attached in order for the application to be processed:

A schedule of proposed rates to be charged for license year       yes     no

A certificate signed by competent and experienced mechanic (ordinance 115.06)       yes     no

Copy of insurance that meets or exceeds limits established in the ordinance       yes     no

Application fee paid in full (check or money order)       yes     no

Application completed in full and signed       yes     no

I hereby certify that I have completely filled out the entire above application and that the application is true, correct, and accurate.

I fully understand that any person who violates any provision of the Taxicabs Ordinance No. 115 is guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not exceeding \$1,000 or by imprisonment for a period not exceeding 90 days or both, plus, in either case, the costs of prosecution.

*Signature of Applicant*

*Date*

**Internal Use Only**

\*done by practice, not required by code

Police\*       approved     denied    Signature: \_\_\_\_\_

City Council     approved     denied    Signature: \_\_\_\_\_

## **Release of Information Form**

*As an applicant for a permit from the City of Hutchinson, Minnesota, I am required to furnish information, which that agency may use in determining my moral, physical, mental, and financial qualifications. In this connection, I hereby expressly authorize release of any and all information, which you may have concerning me, including information of a confidential or privileged nature.*

I hereby release the agency with which I am seeking an application for a license, and any organization, company, or person furnishing information to that agency as expressly authorized above, from any liability for damage, which may result from furnishing the information requested.

<b>Applicant's Information (Please Print)</b>			
Name: _____			
<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>	
Address: _____			
<i>City</i>	<i>County</i>	<i>State</i>	<i>Zip</i>
Date of Birth: _____			
<i>Month</i>	<i>Day</i>	<i>Year</i>	
Place of Birth: _____			
<i>City</i>	<i>State</i>		
Social Security Number: _____			
Driver's License Number: _____			

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\*Please allow two weeks lead time for an investigation (this **does not** include time allowed for scheduling a public hearing if necessary, a publication notice and a City Council meeting).