

OFFICE OF THE TOWN CLERK
200 Howell Avenue
Riverhead, New York 11901
(631) 727 – 3200
Diane M. Wilhelm, Town Clerk
Taxicab Vehicle Permit Application

CHECK ONE

<input type="checkbox"/> Initial Application	<input type="checkbox"/> Renewal Application
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Applicant must submit with the application

_____ Application Fee \$_____ per vehicle Cash/Certified/Business Check/Money Order

Mastercard/Visa/Discover

#_____ Vehicles @ \$_____ = Total \$ _____

_____ New York State Registration

_____ New York State Inspection

_____ New York State Insurance

Please Print All Information

Date of Application _____

Business Name _____

Main Operating Address: _____

Phone: _____

Taxicab Vehicle Permit Number (if, applicable): _____

VEHICLE INFORMATION

Registered Owner _____ **Vehicle Permit** _____

Make _____ **Model** _____ **Year** _____ **Seating Capacity** _____

VIN _____ **License Plate** _____

Has this vehicle been previously licensed as a taxicab? YES NO

If yes, where _____

Is this vehicle leased? YES NO

If yes, name and address of lessee/lessor

Registered Owner _____ **Vehicle Permit** _____

Make _____ **Model** _____ **Year** _____ **Seating Capacity** _____

VIN _____ **License Plate** _____

Has this vehicle been previously licensed as a taxicab? YES NO

If yes, where _____

If yes, name and address of lessee/lessor

Registered Owner _____ **Vehicle Permit** _____

Make _____ **Model** _____ **Year** _____ **Seating Capacity** _____

VIN _____ **License Plate** _____

Has this vehicle been previously licensed as a taxicab? YES NO

If yes, where _____

If yes, name and address of lessee/lessor

-----X
In Matter of the Taxicab Vehicle Permit of

AFFIDAVIT

(Print Legal Name as indicated above)

-----X
State of New York)

: ss:

County of Suffolk)

_____, being duly sworn deposes and says:
(Print Legal Name as Indicated above)

1. Your deponent has the authority to sign on behalf of the above applicant and execute this statement for the Taxicab Business License from the Town of Riverhead;
2. I affirm under the penalties of perjury that the information contained herein is true and accurate.
3. Your deponent makes this affidavit before an officer empowered to administer an oath; such as a notary public;
4. Your deponent states that the applicant has not been charged with, nor convicted of, any crime at any time prior to the making of this affidavit, except for the charges and convictions specified above.
5. Your deponent agrees that the applicant is aware that the applicant has a duty to notify the Town Clerk within twenty-four (24) hours of the applicant being charged with, or convicted of any crime.
6. Your deponent agrees that the applicant understands to allow the Town of Riverhead to conduct a review of all of the necessary records to verify the information provided including Department of Motor Vehicle records.
7. Your deponent agrees that the applicant understands all license fees are **non-refundable**.
8. Your deponent agrees that the taxicab vehicle permit shall be conspicuously posted and securely posted on the interior of the vehicle in such a manner to be readily visible to the passenger in the rear seat. Additionally, the identification sticker shall be securely affixed to the rear bumper.
9. Your deponent agrees that the applicant understands that the taxicab vehicle permit expires one year from the date of issuance.
10. Your deponent agrees that the applicant understands that a copy of this document in part and/or in whole shall be considered effective and valid as the original.
11. Your deponent agrees that the applicant understands to hold harmless the Town of Riverhead, its officers and/or employees from any and all liability regarding from any investigation, inquiry and/or use of the information within this application.

Sworn to before me this _____
day of _____ 20 _____

Notary Public

Above's legal signature

Clearly printed applicant's name

Receipt Number _____