THE CITY OF
SOUTH BELOIT
ILLINOIS

TAXI CAB LICENSE APPLICATION

TERM OF LICENSE-JANUARY 1 TO DECEMBER 31, EACH YEAR

DATE OF APPLICATION: _____

NAME OF APPLICANT: _____

RESIDENCE ADDRESS: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

TRADE NAME OF BUSINESS: _____

TITLE OF APPLICANT: _____

BUSINESS ADDRESS: _____

MAKE OF VEHICLE	BODY STYLE	YEAR/MODEL	SERIAL OR I.D. NUMBER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Pursuant to Section 114-43, this application to be accompanied by a deposit of $15.00 for each such license applied for, as an annual fee for such license, which deposit shall be returned to the applicant if license if refused. Such license fee shall be paid for the issuance of a license for any period of six months or more, and all licenses issued shall expire on the 31st day of December of each and every year. Such license fees shall be in addition to all other State and City vehicle fees or taxes and may be annually renewed subsequent to the 31st day of December. All licensees subject to the terms and provisions of City Ordinance No. 324.

********** TOTAL ALL LICENSE FEES DUE $_____**********

SIGNATURE OF APPLICANT:

_____

FOR OFFICE USE ONLY

DATE RECEIVED: _____ **FEES PAID:**_____

ANNUAL APPLICATION FOR BUSINESS PERMIT LICENSE RECEIVED: _____

MISCELLANEOUS BUSINESS LICENSE APPLICATION RECEIVED: _____

SEWER AND GARBAGE PAST DUE BALANCE: _____

PROPERTY TAXES PAST DUE: _____

CODE ENFORCEMENT FINES PAST DUE: _____