

THE CITY OF  
**SOUTH BELOIT**  
I L L I N O I S



TAXI CAB LICENSE APPLICATION-TERM OF LICENSE-JANUARY 1, 2018 TO DECEMBER 31, 2018

DATE OF APPLICATION: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_  
RESIDENCE ADDRESS: \_\_\_\_\_  
TRADE NAME OF BUSINESS: \_\_\_\_\_  
TITLE OF APPLICANT: \_\_\_\_\_  
BUSINESS ADDRESS: \_\_\_\_\_

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

This application to be accompanied by a deposit of \$30.00 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:  
\_\_\_\_\_

"AN EQUAL OPPORTUNITY EMPLOYER"

