



APPLICATION FOR TAXICAB LICENSE

City of Battle Creek Clerk's Office
10 N. Division, Suite 111, Battle Creek, MI 49014 – (269) 966-3348

Name of Company _____ Phone Number _____

Address _____

Name of Owner/Applicant _____ Date of Birth ___/___/___ Phone Number _____

Address _____ Who will operate? Owner ___ Applicant ___ Other ___

How will drivers be compensated? (Salaried, hourly, commission, or lease) _____

YR/MAKE	VEHICLE NUMBER	REG#	HP	SEATING CAPACITY	# OF DOORS	CAB#	APPROVED BY	CITY TAG#	INSURANCE EXPIRATION
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

If you have prior experience, please specify: _____

Chapter 850 of the Codified Ordinances of the City of Battle Creek: Taxicabs

Fees: License fee-\$35; Inspection fee-\$20 per vehicle

NOTE: Prior to issuance of license, proof of insurance must be provided. The insurance requirement is \$100,000 per person/\$300,000 per accident – Bodily Injury and \$100,000 per accident – Property Damage OR \$300,000 – Bodily Injury / Property Damage – CSL (Combined Single Limit).

License is renewable April 30 of each year.

(Taxi cab drivers are required to be licensed separately by the City Clerk's Office.)

Signature of Applicant: _____ Date: _____

POLICE DEPARTMENT: Approved: _____ **Disapproved:** _____ **By** _____