



CITY OF URBANA / CITY OF CHAMPAIGN VEHICLE FOR HIRE DRIVER LICENSE APPLICATION



PLEASE PRINT

CASE # _____

TODAY'S DATE ____/____/____

NAME _____
LAST FIRST MIDDLE

LOCAL ADDRESS _____
STREET CITY ST ZIP

PERMANENT ADDRESS _____
STREET CITY ST ZIP

PHONE _____ EMAIL ADDRESS _____

WHICH VEHICLE FOR HIRE COMPANY WILL YOU DRIVE FOR? _____

COMPANY ADDRESS _____
STREET CITY ST ZIP

COMPANY PHONE _____

DATE OF BIRTH ____/____/____ PLACE OF BIRTH _____
MONTH / DAY / YEAR CITY / STATE / COUNTY

HEIGHT _____ WEIGHT _____ HAIR _____ EYES _____ SEX _____ RACE _____

DRIVERS LICENSE _____
NUMBER STATE CLASS (ES)

1. HAS YOUR VEHICLES FOR HIRE LICENSE FOR THIS JURISDICTION, STATE, OR ANY STATE, BEEN SUSPENDED WITHIN THE LAST SIX (6) MONTHS? _____ IF YES, PLEASE EXPLAIN _____
2. ARE YOU FAMILIAR WITH THE TRAFFIC LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES COVERING VEHICLES FOR HIRE IN THE CITIES OF CHAMPAIGN AND URBANA? _____
3. DO YOU HAVE A VALID COMMERCIAL DRIVER'S (CDL) LICENSE? _____ IF NO, YOU ARE NOT ELIGIBLE TO OPERATE A VEHICLE DESIGNED TO TRANSPORT 16 OR MORE PERSONS.

UNDER PENALTIES AS PROVIDED BY LAW, I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION ON THIS FORM IS TRUE, CORRECT, AND COMPLETE.

SIGNED _____
APPLICANT SIGNATURE PRINT NAME

SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____, 20____.

NOTARY _____

SEAL

COMMISSION EXPIRES: _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED PERSON HAS COMPLIED WITH THE CITY OF URBANA AND THE CITY OF CHAMPAIGN RELATING TO THE ISSUANCE OF A VEHICLE FOR HIRE DRIVERS LICENSE AND THE APPLICANT HAS DEMONSTRATED HIS ABILITY TO DRIVE A MOTOR VEHICLE AS EVIDENCED BY THE POSSESSION OF A VALID STATE OF ILLINOIS OPERATORS LICENSE.

FINANCE	FOR OFFICE USE ONLY	POLICE
NOVEMBER 1 – OCTOBER 31, _____		
LICENSE # _____		APPROVED / DISAPPROVED
DATE ENTERED _____		BY _____ POLICE OFFICIAL
LICENSE FEE \$ _____		