

CITY OF GILLETTE
BUSINESS LICENSE APPLICATION
PUBLIC TRANSPORTATION



LICENSE #: _____

ANNUAL – NONREFUNDABLE LICENSE FEE: \$200

ATTACH THE FOLLOWING:

- ___ Copy of Wyoming Department of Transportation operating authority for transporting of passengers evidencing compliance with Department of Transportation Rules and Regulations
- ___ Proof of business vehicle liability insurance coverage for owned, non-owned and hired vehicles with minimum limits for bodily injury and property damage in the amount of \$500,000.00, combined single limit each accident per occurrence. Certificate shall set forth a requirement that the City shall receive 30 days notification by the insurance company prior to cancellation, reduction, suspension or revocation of coverage for public transportation vehicle
- ___ **Current** vehicle inspection report for each vehicle providing public transportation services or WYDOT Inspection Certificate
- ___ A written description of Taximeter to be utilized, if any, and method to compute fares
- ___ Copy of schedule of fares/rates Forward to Police Chief by City Clerk Staff on: _____
- ___ Fingerprints taken by the Police Department Date of Fingerprints _____
- ___ Certificate of Good Standing with Wyoming Workforce Services regarding Worker's Compensation & Unemployment Insurance.

BUSINESS NAME: _____

APPLICANT NAME: _____

OWNER'S NAME: _____

APPLICANT BUSINESS ADDRESS CITY/STATE/ZIP: _____

APPLICANT MAILING ADDRESS (IF DIFFERENT): _____

APPLICANT BUSINESS TELEPHONE #: _____

TYPE OF BUSINESS ENTITY: INDIVIDUAL PARTNERSHIP LLC CORPORATION

IF BUSINESS IS A PARTNERSHIP, LLC, OR CORPORATION, LIST ALL NAMES AND BUSINESS ADDRESSES OF PERSONS HOLDING ANY LEGAL OR BENEFICIAL INTEREST AND THEIR BIRTH DATES: (Attach additional paperwork if necessary)

NAME	BUSINESS ADDRESS	BIRTH DATE

(Attach additional listing if necessary)

WYOMING SALES TAX #: _____

HAVE YOU EVER HAD A LICENSE, PERMIT OR APPLICATION RELATING TO A PUBLIC TRANSPORTATION BUSINESS REVOKED, SUSPENDED OR DENIED WITHIN THE PAST 10 YEARS? (If yes, explain) YES NO

DESCRIPTON AND NUMBER OF PUBLIC TRANSPORTATION CONVEYANCES THAT WILL BE UTILIZED? (Attach additional paperwork if necessary)

Vehicle #1: _____

Vehicle #2: _____

Vehicle #3: _____

AFFIDAVIT/AUTHORIZATION

The undersigned applicant hereby authorizes the City of Gillette and its agents and employees to seek information and conduct investigations into the truth of the foregoing statements as set forth in this application, and agrees to comply fully with the rules and regulations of the City of Gillette, Wyoming, governing the license requested, and further declares that the foregoing information contained and submitted with this application is true and correct. The undersigned applicant also confirms and verifies the following:

- Each driver will drive or operate a public transportation conveyance only under that individual's permit;
- Each permitted driver has and will maintain any and all operator's licenses required under Title 31 of Wyoming Statutes and under rules and regulations of Wyo. Dept. of Transportation;
- Each driver is insurable and will be maintained as an insured under applicant's liability insurance coverage

NOTICE TO APPLICANT: Every public transportation business license or driver permit is subject to revocation or suspension pursuant to Chapter 19.9 of Gillette City Code even if the information which justifies suspension or revocation existed at the time the license or permit was granted.

_____ Date _____ Applicant Signature

STATE OF WYOMING)
) ss
County of Campbell)

Subscribed and sworn to before me this _____ day of _____, 2014.

Notary Public

SEAL

My Commission Expires: _____

POLICE CHIEF (or Designee): _____

CITY CLERK: (or Designee): _____

FOR USE BY CITY CLERK'S OFFICE

BY: _____

FEE PAID \$ _____ DATE PAID _____ DATE ISSUED _____

COMMENTS: _____

RECEIPT OF ORDINANCE REGULATING THE OPERATION OF A TAXI AND LIMO

DATE: _____ BUSINESS NAME: _____

NAME OF AUTHORIZED AGENT FOR BUSINESS: _____

I, _____, authorized agent representing the above referenced business, have received a copy of City Code, Chapter 19, for Gillette, Wyoming, pertaining to the Licensing and Regulation of Public Transportation, Taxicabs, and Vehicles for Hire. I understand it is my responsibility, as the authorized agent, to ensure that all drivers of said business in Gillette, Wyoming, have been informed of the information provided in the attached document.

Dated this _____ day of _____, 20_____.

Signature