

APPLICATION FOR PUBLIC CONVEYANCE

(Ambulance, Taxi, Limousine, Drivers for Hire)

Fee: Company - \$250.00 Per Year

Driver: - \$25.00 Per Year

All drivers must return completed application to the Enid Police Department with a copy of their Oklahoma Driver's License and 2 recent photographs. Ambulance drivers must have fingerprint records on file with the Enid Police Department.



Organization	<p>Company Name in which you are employed and registered with the Oklahoma Secretary of State? _____</p> <p>Mailing Address (Business): _____ _____</p> <p>Phone Number (Business): _____</p>												
Driver Information	<p>Full Legal Name: _____</p> <p>Alias or Previous Names: _____</p> <p>Street Address: _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>Home Phone: _____ Cell Phone: _____</p> <p>Social Security Number: _____ Date of Birth: _____</p> <p>OK Driver's License Number: _____</p> <p>License Type: _____ Exp. Date: _____</p> <p>Age: _____ Sex: _____ Height: _____</p> <p>Hair Color: _____ Weight: _____ Eye Color: _____</p> <p>Have you ever been licensed in another state as a chauffeur or conveyance driver? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list the state and license number: _____ _____</p> <p>Have you ever had a chauffeur or conveyance driver's license revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, state the date and reason. _____ _____</p> <p>How long you have lived in Enid? _____</p> <p>List all places of residence from the last three years:</p> <table border="1"> <thead> <tr> <th style="text-align: center;"><u>Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	<u>Address</u>	<u>City</u>	<u>State</u>	_____	_____	_____	_____	_____	_____	_____	_____	_____
<u>Address</u>	<u>City</u>	<u>State</u>											
_____	_____	_____											
_____	_____	_____											
_____	_____	_____											

**ATTACH 2
PHOTOGRAPHS**

Driver Information (Cont.)

List all places of employment for the last (3) years:

Company Name

Address

Phone Number

_____	_____	_____
_____	_____	_____
_____	_____	_____

List previous experience in driving public conveyance vehicles:

Have you ever been arrested for a crime, either misdemeanor or felony? Yes No

If yes, list all arrests, including the offense, year of arrest, if there was a conviction, sentence, and court of record.

Offense

Year

Conviction

Sentence

Court of Record

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I hereby certify that all of the above information is true and correct, and that false and/or omitted information is grounds for license denial or revocation.

Signature of Applicant

Date

CITY OF ENID USE ONLY

Police Department Use Only

Local Records Check Record Yes No Initials: _____ Date: _____

Criminal History Check Record Yes No Initials: _____ Date: _____

Fingerprints New On File

Approved Denied _____

Chief of Police or Designee

City Clerk's Office Use Only

License Number: _____ | Expiration Date: _____

Amount Collected: _____ | By: _____