



APPLICATION FOR
TAXICAB/TROLLEY DRIVER LICENSE
 CITY OF LAKE GENEVA, WISCONSIN

RECEIPT NO: _____
 TOTAL AMOUNT: _____
 DATE: _____

ANNUAL FEE OF \$15 DUE UPON APPLICATION

FILL IN ALL BLANKS COMPLETELY. INCOMPLETE APPLICATIONS ARE REJECTED

APPLICANT (please print clearly)

Name	Last	First	Middle
Address			
City, State, Zip			
Phone			
Social Security			
Date of Birth	Date of Birth	Place of Birth	
Drivers License Copy Attached			
Marital Status	Married	Single	Number of Children

How long have you lived at current residence? _____

Place of Residence for three years prior to current address? _____

Last Two Employers _____

Have you been convicted of a felony or misdemeanor? Yes No
 If Yes, Please explain: _____

Have you previously been licensed as a driver or chauffeur Yes No
 If Yes, When and Where: _____

Have you ever had a driver's license or chauffeur's license revoked? Yes No
 If yes, where? _____ please explain: _____

I HEREBY AFFIRM THE FOREGOING ANSWERS ARE TRUE AND CORRECT.

 DATE: _____

SIGNATURE

Fore Office Use Only Background Completed _____ Fingerprinted by LGPD _____
 Police Chief Recommendation: _____ Approved Denied

Finance, License & Judicial Approval: _____ Council Approval: _____