

CITY OF ATLANTIC CITY

**DEPARTMENT OF LICENSING & INSPECTIONS
REGULATORY DIVISION/MERCANTILE LICENSE SECTION
CITY HALL – SUITE 120
1301 BACHARACH BOULEVARD
ATLANTIC CITY, NJ 08401-4603
Telephone – (609) 347-5315
Fax – (609) 347-6113**



APPLICATION FOR RENEWAL OF TAXICAB DRIVER'S LICENSE

The undersigned desires to drive a Taxicab in accordance with the laws of the State of New Jersey and the Ordinances of the City of Atlantic City

Date Original License Issued _____ License Number: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone No: _____ Cell Phone No. _____

Are you a U.S. Citizen: _____ Naturalized: _____ Date Naturalized: _____

If you are not a U.S. Citizen, you must present your Green Card.

Driver's License No. _____ State: _____ Exp. Date: _____

Date of Birth: _____ Age: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Has your Driver's License ever been suspended or revoked? ____ Yes ____ No. If yes, explain:

Has your taxi license ever been suspended? ____ Yes ____ No. If yes, explain: _____

Have you ever been convicted of a crime? ____ Yes ____ No. If yes, explain: _____

Are you currently on parole or probation? ____ Yes ____ No. If yes, explain: _____

If you are on Parole or Probation, a letter from your Parole or Probation Office must be attached.

Can you read and/or write the English Language? ____ Yes ____ No

APPLICATION FOR RENEWAL OF LICENSE

Applicant must indicate who they will be drive for:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Owner or Lessee’s Mercantile Driver No. _____ Medallion No. _____

The Applicant must attach the following items to your License Application or it will be deemed incomplete and will not be processed until it is complete:

- New Jersey Driver’s License
- Proof of citizenship i.e., Birth Certificate, Passport or if you are not a citizen submit your Permanent Residence Card or Work Authorization Card

AFFIDAVIT

I, _____, being of full age and being duly sworn upon my oath, according to the law, depose and say that I have read and understand the foregoing Application, the statements therein are true and I have signed same.

Applicant’s Signature: _____

Receiving Clerk _____

Signature

Date