



APPLICATION FOR VEHICLE FOR HIRE LICENSE  
(Chapter 4.64 of the Sioux City Municipal Code)

DATE: \_\_\_\_\_

Type of Ownership:  Corporation  Individual  Partnership

NAME OF REGISTERED OWNER OF VEHICLE(S): \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS OF OWNER: \_\_\_\_\_

PHONE NUMBER WHERE APPLICANT MAY BE REACHED: \_\_\_\_\_

NUMBER OF VEHICLES FOR WHICH AN APPLICATION IS BEING FILED: \_\_\_\_\_

COLOR SCHEME OF THE VEHICLE(S): \_\_\_\_\_

Please answer the following for EACH vehicle applying for:

Cab #	State License #	VIN #	Year	Make	City License #

1. You must provide a Vehicle for Hire Inspection Form for each vehicle to be licensed.
2. You must provide a Certificate of Insurance from an Iowa based insurance company.
3. It is acknowledged that Chapter 4.64 Taxicabs and Other Vehicles for Hire of the Municipal Code of City of Sioux City, Iowa, (and amendments thereto) have been read and are understood. We will conform to this chapter and any amendments thereto at all times.

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
DATE

*The City of Sioux City does not discriminate on the basis of disability in admission to, access to, or operations of its programs, services, or activities. Individuals who need auxiliary aids for effective communication in programs and services of the City of Sioux City are invited to make their needs and preferences known to the ADA Compliance Officer, City Hall, 405 6<sup>th</sup> Street, Room 204, (712) 279-6259. This notice is provided as required by Title II of the Americans with Disabilities Act of 1990.*

**FOR CITY USE ONLY**

Date Approvals Requested on: \_\_\_\_\_

Police Department: Approve:  Deny:  Date: \_\_\_\_\_