

Township of Howell
County of Monmouth, New Jersey
Taxi Driver Application

Fees: \$50.00 per year or portion thereof

Term: January 1st — December 31st for the licensing year _____

Fee Received: _____

Date Received: _____

Instructions

This application must be filled out in full and signed by the applicant.

Please type or print clearly all information. Any false statement is sufficient cause for exclusion of the applicant from consideration of licensing. Read each question carefully and answer all that is asked.

DRIVERS: Your application will not be reviewed unless you provide all of the following information:

Proof of fingerprinting and background check. Fingerprinting and background checks must be done at Morpho Trak, Inc., and all fees associated with same are the applicant's responsibility.

The recommendations of three reputable citizens

A valid New Jersey Driver's License

Proof of citizenship or legal resident status

Proof of your physical condition by a doctor of your choice is required before your application is processed.

Upon completing this application, take it to a notary public and all applicants must sign the application in the presence of the notary testifying that the statements on the application are true to the best of your knowledge.

Approval of all applicants is subject to review by the Township of Howell Police Department.

THERE MAY BE AMENDMENTS TO THE CURRENT TAXI ORDINANCE THAT YOU WILL HAVE TO FOLLOW IN ORDER TO KEEP YOUR APPROVED LICENSE.

SIGN HERE TO ACKNOWLEDGE YOU HAVE READ AND UNDERSTOOD THE ABOVE INSTRUCTIONS

Applicant: _____

Please be advised that the attached applicant has been fingerprinted and has been cleared with the New Jersey State Bureau of Identification. I have examined the foregoing application and find no police record.

Police Department: _____

1. Has your driver's license and/or registration ever been suspended or revoked in this state or any other? Yes No If yes, why? _____

2. Do you have any criminal charges of any sort, pending against you? Yes No If yes what are the charges? _____

3. Have you ever been convicted of a crime? Yes No If so give date, place and nature of the charges and their disposition? _____

4. Are you currently serving any sentence including probation? Yes No If so for how long? _____

5. Do you currently suffer from any mental condition, physical impairment or sickness that may affect your ability to operate a motor vehicle safely? Yes No If yes, what? _____

6. Have you ever been hospitalized, treated or observed by a doctor or psychiatrist for a mental condition? Yes No
7. Do you have a chemical or alcoholic dependency? Yes No
8. If yes, are you currently being treated for your chemical or alcohol dependency? Yes No
9. Do you presently own or have you ever owned your own company? Yes No If so, give company name, address and date. _____

NOTICE TO ALL PERSONS SIGNING THIS FORM:

The Township of Howell reserves the right to prosecute any false statement made on this form to the fullest extent of the law against the signer(s).

Be on notice that any person who includes false statement in this form (whether by omitting requested information, or by including information that is false), and then signs the form, will be subject to punishment. Pursuant to N.J.S.A. 2C:28-3(a), it is a crime of the fourth degree to make a false written statement on this form which the signer does not believe to be true.

Pursuant to N.J.S.A. 2C:28-2(a), it is a crime of the fourth degree to make a false statement under oath or equivalent affirmation.

By my signature below, I hereby swear and affirm that:

I am at least twenty-one (21) years of age.

I am (check one) () a United States citizen or () a legal resident alien.

If a resident alien, a copy of the alien registration card or work permit must be submitted with this application.

I possess a current and valid New Jersey driver's license. ***A copy of your NJ Driver's License must be submitted with this application.***

I am not addicted to the use of narcotics or intoxicating liquors.

I am able to read, speak and understand the English language.

I have not been convicted of any crime involving moral turpitude.

I have taken the time to study state and local motor vehicle laws, rules, and regulations. I have also made sure that I am fully informed of the geography of the Township of Howell, Monmouth County in the State of New Jersey.

I have not been convicted, within the three years prior to the date of the application, of reckless driving, driving while intoxicated, leaving the scene of an accident or driving more than 30 miles an hour above the speed limit.

At the time of this application, I have no more than six (6) New Jersey State Division of Motor Vehicle points on my driving record, or the equivalent if licensed in any other state.

I agree that I will inform the Township of Howell in writing **WITHIN THREE DAYS** of any change in, or addition to, the information set forth above.

I am the applicant named above; that the questions are answered by me and that the statements of facts contained in the forgoing application are true to the best of my knowledge, information and belief.

Signature of Applicant

State of New Jersey

County of Monmouth

Subscribed before me on this _____ day of _____ year _____

Notary Public