



**TAXICAB DRIVER'S LICENCE APPLICATION**

Town of Ajax  
 65 Harwood Avenue South  
 Ajax, Ontario  
 L1S 2H9

Application Type  
 Renewal   
 New

To be completed by Applicant- Fill in all information and please print neatly		
Date of Application:	AMANDA # (Filled out by Officer)	
Given Name:	Middle Name:	
Surname:	Date of birth: (yyyy/mm/dd) ____/____/____	
Street Number and Address:	Municipality:	Postal Code:
Home Phone:	Business/Cell Phone:	
Ontario Driver's Licence Number:	Taxi Company:	

Are you or have you ever been licensed previously as a Taxicab Driver?  Yes  No

If so, the most recent licence was issued in Municipality \_\_\_\_\_ Year \_\_\_\_\_

I solemnly declare that to the best of my knowledge, the information on and included with this application is true and complete in all respects.

\_\_\_\_\_  
 Signature of Applicant

Personal information contained on this form is collected under the authority of the Municipal Act, and will be used for the purpose of making a determination of the application and maintaining a business record upon acceptance. Questions about this collection should be directed to Derek Hannan, Manager, By-law Services at 65 Harwood Avenue South, Ajax, Ontario L1S 2H9 or call (905)619-2529, ext. 3344.

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**FOR OFFICE USE ONLY**

Temporary Licence:  Yes  No

Expiry Date: \_\_\_\_\_

**REQUIRED DOCUMENTS**

Health Certificate  Driving Abstract  Criminal Information  \$100.00 Fee

EXAM: Date: \_\_\_\_\_ Examiner: \_\_\_\_\_ Mark: \_\_\_\_\_

Issued By:	Date:
Approved By:	Date: