

CAPITAL REGION

HACK LICENSE APPLICATION

Instructions:

1. Applicant must complete the Initial Hack License Application and have read a copy of the taxi ordinance or local law of the municipality in which they are applying.
2. Applicant must supply the following with their application:
 - Three (3) recent, untouched photographs
**When taking photographs, you may not wear a hat, scarf, sunglasses or anything that will alter your appearance.*
 - Certified copy of applicant's driving record, obtained by the applicant from the New York State Department of Motor Vehicles.
**Make sure that NYS DMV has your current license class and current address on file before they print your abstract. The license class and address on your abstract, driver's license, and application must all match with the same information.*
 - A copy of the applicant's current NYS Driver's License
**License must be class A, B, C, or E.*
 - If not a U.S. Citizen, applicant must supply documentation of U.S. working status.
 - If applicant has indicated they have been convicted of a crime, include the certificate of disposition for each charge.

Questions? Visit taxi.cdta.org or contact your local municipality for more information.



HACK LICENSE APPLICATION

1. Name: _____
2. List any other names you have used in the past, including any name under which you have been granted a driver's license: _____
3. Street Address: _____
City, State, Zip Code: _____
4. Phone Number: _____
5. List all addresses for the past 5 years.
 - Street Address: _____
City, State, Zip Code: _____ Dates of Residency: _____
 - Street Address: _____
City, State, Zip Code: _____ Dates of Residency: _____
 - Street Address: _____
City, State, Zip Code: _____ Dates of Residency: _____
 - Street Address: _____
City, State, Zip Code: _____ Dates of Residency: _____
 - Street Address: _____
City, State, Zip Code: _____ Dates of Residency: _____
6. Social Security Number: _____
7. Age: _____
8. Height: _____
9. Eye (Color): _____
10. Hair (Color): _____
11. Place of Birth: _____
12. United States Citizen? Yes___ No___
 - If no, you are required to provide documentation of your U.S. working status.
Resident Alien Registration number: _____
13. Places of Previous Employment for the past 5 years:
 - Name of Company: _____
Dates of Employment: _____ Phone Number: _____
 - Name of Company: _____
Dates of Employment: _____ Phone Number: _____

• Name of Company: _____

Dates of Employment: _____ Phone Number: _____

Please add additional sheets if necessary.

14. Are you subject to any medical condition which might render you incapable or unfit to safely operate a motor vehicle? Yes ___ No ___

15. Are you addicted to any alcoholic beverages or controlled substances? Yes ___ No ___

16. Can you clearly communicate using the English language? Yes ___ No ___

17. Have you ever been convicted of a crime? Yes ___ No ___

• If yes, please provide the following information:

State _____ City _____ Date _____

Original Charge _____

Additional sheets may be attached if necessary. Please attach a certificate of disposition for each charge.

18. Have you ever been or are you currently licensed as a taxi driver? Yes ___ No ___

• If yes, in what municipalities? _____

• If yes, has your license ever been revoked? Yes ___ No ___

• If yes, for what cause? _____

19. Which municipality/municipalities are you applying for? _____

20. I am applying for a universal hack license: Yes ___ No ___

I certify or declare under penalty of perjury under the laws of the State of New York that I have answered all the preceding questions and that the information contained herein is true and correct. I understand that falsification of answers given or material submitted will result in denial of this application and/or denial, suspension, or revocation of my taxi license. I hereby authorize the municipality and its designees to use the information I have provided to check criminal histories, arrest and driving records, and warrant information, and to enroll in the NYS LENS Program. I understand that the information contained within the criminal background investigation is confidential, except that it may be conveyed to other law enforcement or licensing agencies.

The municipality or its designees will conduct an investigation of your background, which includes fingerprint searches through the Division of Criminal Justice Services.

Print Name of Applicant: _____

Signature of Applicant: _____

Date: _____

