

FINGERPRINTING

NOTICE

Every driver and owner must be fingerprinted. For fingerprinting information, contact East Windsor Police at 609.448.5678 (Press "0") and the dispatcher will schedule your appointment.

- A.) If you are renewing an existing permit and have previously been fingerprinted you must still make an appointment to "renew" your fingerprints. You must contact the above number and make an appointment as if you are being fingerprinted.

OWNER

File in Duplicate

NEW APPLICATION: _____ RENEWAL: _____

APPLICATION YEAR: 20____

TOWNSHIP OF EAST WINDSOR

TAXI / LIMOUSINE

(Circle One)

OWNER APPLICATION

Name of Taxi Cab or Limousine Company: _____

Owner, Owners or Corporation, Name of Applicant: _____

Corporation/Partnership/Individual Permanent Address: _____

Block _____, Lot _____

Total Number of Vehicles Owned by the Company: _____

Telephone Number with area code: _____

Facsimile Number with area code: _____

E-Mail Address: _____

Date of Birth: _____ Age: _____ Sex: _____

Complexion: _____ Height: _____ Weight: _____

Race: _____ Eyes: _____ Hair: _____ Blood Type: _____

S.S.#: _____ DL#: _____

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Number of Locations: _____

Address of Other Location (s): _____

Hours of Taxi/Limousine Operation: _____

If applicant is a corporation, give name and address of registered agent (if applicant is a partnership, give names and addresses of all partners: _____

CRIMINAL HISTORY / BACKGROUND:

- | | | |
|---|-----|----|
| 1. Have you ever been convicted of a crime? | YES | NO |
| 2. Have you ever been convicted of any Municipal Ordinance? | YES | NO |

(Please explain any YES answers on a separate sheet of paper to include the Date and Place of each conviction; Nature of the offense; and Punishment or Penalty imposed.)

DESCRIPTION OF TAXI CAB OR LIMOUSINE: (If more than one (1) vehicle is owned, give the following information on a separate sheet of paper for each and attach hereto.)

Year, Make and Model of Vehicle: _____

Description of Vehicle: _____
(Color, 4-door, tinted windows, etc.)

Serial Number (VIN): _____

License Plate #: _____

Seating Capacity: _____

This Application must be accompanied by recommendations from at least two (2) reputable citizens of the Township of East Windsor, a schedule of fees, a copy of the vehicle(s) registration, Power of Attorney and an ORIGINAL certificate of insurance for each taxi or limousine. In addition, the applicant shall affix two photographs of a minimum size of 1 ½ inches by 1 ½ inches showing the applicant's face front and profile.

The applicant's signature certifies that all statements made on this application are true and accurate to the best of his/her knowledge and understands that withholding information or making false statements will be basis for immediate rejection of this application. The applicant further authorizes the East Windsor Police to conduct an investigation into the applicant's prior activities (including but not limited to Motor Vehicle Records, Criminal History Records, and Court Documents) to confirm the accuracy of the applicant's answers and determine his/her responsibility, moral character and ability to operate a Taxi/Limousine Company.

Furthermore, the applicant shall submit to fingerprinting by East Windsor Police Department for the purpose of furthering the applicant background investigation. The application will not be processed until such time the applicant submits to the taking of his/her fingerprints. However, the subsequent return of the fingerprints will not be cause for delay of the issuance of the permit if all other necessary information has been provided and no impediment exists. Appointments for the taking of fingerprints can be made by telephoning the police department at (609) 448-5678. Applicable fingerprinting fees will apply.

Should the fingerprints/background check yield information that would have constituted a rejection or denial of the applicant's permit or license, any license or permit issued by the township may be revoked at that time.

Applicant's Signature

Date

Sworn and subscribed to
before me at _____
this date _____

Notary Public of New Jersey

FOR OFFICIAL USE BY EAST WINDSOR TOWNSHIP OFFICIALS:

Date Application Filed: _____

POLICE RECOMMENDATIONS:

Date: _____ Approved: _____ Denied: _____

Signature of Chief of Police: _____

License Number Issued: _____

FEES: Owner \$100.00 plus \$25.00 per vehicle
\$10.00 certified letter to Motor Vehicle
\$10.00 Tag Transfer
\$25.00 Failure to Renew by January 31 (per application)

Total Paid: _____ Date: _____ Type of Payment: _____



POWER OF ATTORNEY

I, _____, the undersigned affirm that, for the purpose of complying with the laws of New Jersey relating to the registration of vehicles in said State, hereby irrevocably appoint the Director, Division of Motor Vehicles, State of New Jersey, Department of Transportation, its true and lawful attorney for the purpose of acknowledging service of any process out of a court of competent jurisdiction to be served against the insured by virtue of the indemnity granted under the insurance policy or bond filed with the Township of East Windsor in conjunction with such registration in accordance with NJSA 48:1 et seq.

It is requested that a copy of any notice, process or pleading service hereunder be mailed to:

**TOWNSHIP OF EAST WINDSOR
MUNICIPAL CLERK'S OFFICE
16 LANNING BOULEVARD
EAST WINDSOR, NEW JERSEY 08520**

Date

Signature – Title

Business Name

Business Address

City, State, Zip Code

NOTARY CERTIFICATE

State of New Jersey
County of Mercer



Sworn and subscribed before me this _____
day of _____, 20__.

Notary Public