## Borough of Hightstown 156 Bank Street, Hightstown, NJ

# Taxicab Company Application January 1, 2023 – December 31, 2023

Date Received By Clerk:
Fee Received:
Date Forwarded To Police Dept:

FEE: \$100 per vehicle
Company Name:
There is a maximum of five (5) licensed taxicab companies allowed to operate within the Borough of Hightstown per the current ordinance. The taxicab company licenses shall be awarded on a first come first served on a qualifying basis.
Instructions
This application must be filled out in full and signed by the taxicab owner listed on the application.
Please type or print clearly all information. Any false statement is sufficient cause for exclusion of the applicant from consideration of licensing.
Your application will not be reviewed unless you provide all of the following information:
Check or Money Order for \$100 PER VEHICLE
Copy of valid NJ vehicle registration card for each vehicle listed on the application
Copy of valid insurance card for each vehicle listed on the application
Certificate of Insurance listing all vehicles listed on the application
Proof of fingerprinting. Appointments must be made on-line. See instructions attached.
Copy of valid New Jersey Driver's License
Proof of citizenship or legal resident status
Copies of registration and insurance cards must be on one (1) page per vehicle and attached in the same order as the vehicles listed on the application. Do not put copies of the vehicle titles with the is application.
The completed application must be signed in the presence of a notary public 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 Borough of Hightstown 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 below to acknowledge that you have read and understand the above instructions.
Signature of Applicant
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

# **OWNER'S INFORMATION** – Please type or print all information

Name of Application:			
La Company Names		First	Middle
Company Name:			
Company Permanent Add	lress:		
Telephone Number:			
Email address:			
		and address of registered age hip, give names and addresses	nt and Employer Identification s of all partners.
VEHICLE INFORMATIO	N		
Make and Model of Vehicl	e:		
Color	Year	License Plate Number	
VIN Number			
Address where this verile	ic will be kept wi	ien not on daty	
VEHICLE INFORMATIO	N		
Make and Model of Vehicl	e:		
Color	Year	License Plate Number	
VIN Number			
Address where this vehicl	le will he kent wh	nen not on duty	
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### **VEHICLE INFORMATION**

Make and Model of Vehi	cle:	
Color	Year	License Plate Number
VIN Number		
Address where this vehi	icle will be kept wh	nen not on duty
VEHICLE INFORMATION	ON	
Color	Year	License Plate Number
VIN Number		
Address where this vehi	icle will be kept wh	nen not on duty
VEHICLE INFORMATION	ON	
		License Plate Number
Address where this vehi	cle will be kept wh	nen not on duty
VEHICLE INFORMATION	ON	
Make and Model of Vehi		
Color	Year	License Plate Number
VIN Number		
Address where this vehi	icle will be kept wh	nen not on duty

### **VEHICLE INFORMATION**

Make and Model of Veh	nicle:	
Color	Year	License Plate Number
VIN Number		
Address where this veh	nicle will be kept wh	en not on duty
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VEHICLE INFORMAT	ION	
Color	Year	License Plate Number
VIN Number		
Address where this veh	nicle will be kept wh	en not on duty
VEHICLE INFORMAT	ION	
		License Plate Number
Address where this veh	nicle will be kept wh	en not on duty
VEHICLE INFORMAT	ION	
Make and Model of Veh		
		License Plate Number
		en not on duty

#### **VEHICLE INFORMATION**

Make and Model of Vehicle:		
Color	_Year	_License Plate Number
VIN Number		
Address where this vehicle will be kept when not on duty		
VEHICLE INFORMATION		
Color	_Year	_License Plate Number
VIN Number		
Address where this vehicle will be kept when not on duty		

#### NOTICE TO ALL PERSONS SIGNING THIS FORM:

The Borough of Hightstown reserves the right to prosecute any false statement made on this form 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 Borough of Hightstown, Mercer County, and key locations (such as airports and train stations) 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 eight (8) 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 Borough of Hightstown in writing WITHIN THREE DAYS of any change in, or addition to, the information set forth above.

I am the owner of the above named company; 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 Company Owner
	Company Owner's Name (Printed)
State of New Jersey ss  County of  Subscribed before me on this day of	, 20
Notary Signature  My commission expires	