CITY OF WISCONSIN DELLS LICENSE APPLICATION FOR: <u>TAXICAB SERVICE LICENSE</u> Fee: \$200 (Plus \$75 for first vehicle, \$50 each additional vehicle) New Renewal				
Date Submitted:	Amount Paid: \$	Receipt	No	
Name of Applicant (Last, First, MI): Address of Applicant:				
Date of Birth: Pl	hone #:Email	:		
Applicant Driver's License Nur	mber:		State:	
Business Name:	ness Name:Business Phone #:			
Business Address:				
Proposed hours of Operation:				
Proposed Rate Schedule:				
Signature of A	pplicant	Da	ate	
 Note: Incomplete, false, or misleading information on the application form can delay the review process and/or be grounds for denial of permit or license. License subject to compliance with Wisconsin Dells Code Section 4.15 and 16.21. (1) Premises. No license or permit shall be granted or renewed for the operation of any trade, profession, business or privilege, for which a license or permit is required by any provision of this Code, for operation upon any premises which taxes or assessments or other financial claims of the City, or any City utility are delinquent and unpaid. (2) Persons. No person who is delinquent in the payment of any taxes, assessments or other claims owed to the City, including a forfeiture resulting from a violation of any Ordinance of the City, shall be granted or renewed any license for any trade, profession, business or privilege in the City for which a license or permit is required by any provision of this Code. 				
Office Use Only				
Police Dept. Background Check D	Date: By: Chief	Recommendation: App	rove 🖵 Deny	
License Approved:	License Valid from	, 20 through Mai	rch 31, 20	
Conditions (if any):				
Date Denied:	Reason(s):			
Utilities Tax Rev. 02/23	es 🖬 A/R; Other	Parking	🛛 Court	