

**Application for License to Operate Vehicles for Hire
City of Detroit Lakes MN**

To the City Council of the City of Detroit Lakes, County of Becker, and State of Minnesota:

In compliance with Ordinance No. 610.00 of the City of Detroit Lakes, Minnesota, the undersigned hereby makes application to the City Council for a license to operate vehicles for hire for the period terminating **December 31, 20** .

The applicant herewith deposits the sum of \$ _____ for the first vehicle to be licensed and \$ _____ for each additional vehicle.

The number and description of the vehicles to be used in said service by the undersigned are as follows:

MAKE OF VEHICLE: _____ STATE LICENSE NO: _____

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MAKE OF VEHICLE: _____ STATE LICENSE NO: _____

The name and drivers license of all persons that will be driving under this license are as follow:

NAME OF DRIVER: _____ DRIVERS LICENSE #: _____

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NAME OF DRIVER: _____ DRIVERS LICENSE #: _____

Do you carry a Certificate of Registration Motor Carrier of Passengers in the State of Minnesota or any other State?

Yes/Certificate Number: _____ Expiration Date: _____ No: _____

Name of Business: _____ Date: _____

Applicant Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Signature: _____ TOTAL FEE: _____

State of Minnesota License Applicant Information

Under Minnesota law (M.S. 270.72), the agency issuing you this license is required to provide to the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the Social Security number of each license applicant.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we must advise you that:

- This information may be used to deny the issuance, renewal or transfer of your license if you owe the Minnesota Department of Revenue delinquent taxes, penalties, or interest;
- The licensing agency will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Act, the Department of Revenue is allowed to supply this information to the Internal Revenue Service;
- Failing to supply this information may jeopardize or delay the issuance of your license or processing your renewal application.

Please fill in the following information and return this form along with your application to the agency issuing the license. **DO NOT RETURN THIS FORM TO THE DEPARTMENT OF REVENUE.**

Please print or type

Name of license being applied for and license number (if renewal):		License Number #:
Licensing Authority (name of city, county, or state agency issuing license):		
License Renewal Date:		

PERSONAL INFORMATION:		
Applicant's last name	Applicant's first name and middle initial	Social Security Number
Applicant's address	City	State Zip Code

BUSINESS INFORMATION:		
Business name		
Business address	City	State Zip Code
Minnesota tax identification number	Federal tax identification number	
<small>If a Minnesota tax identification is not required, please explain on the reverse side of this form.</small>		

Applicant Signature: _____

Signature _____ Title _____ Date _____

Certificate of Compliance Minnesota Workers' Compensation Law

PRINT IN INK or TYPE.

Minnesota Statutes, Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in any activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minnesota Statutes, Chapter 176. The required workers' compensation insurance information is the name of the insurance company, the policy number, and the dates of coverage, or the permit to self-insure. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

A valid workers' compensation policy must be kept in effect at all times by employers as required by law.

BUSINESS NAME (Individual name only if no company name used)	LICENSE OR PERMIT NO (if applicable)
DBA (doing business as name) (if applicable)	

BUSINESS ADDRESS (PO Box must include street address)	CITY	STATE	ZIP CODE
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YOUR LICENSE OR CERTIFICATE WILL NOT BE ISSUED WITHOUT THE FOLLOWING INFORMATION. You must complete number 1, 2 or 3 below.

NUMBER 1 COMPLETE THIS PORTION IF YOU ARE INSURED:

INSURANCE COMPANY NAME (not the insurance agent) _____

WORKERS' COMPENSATION INSURANCE POLICY NO.	EFFECTIVE DATE	EXPIRATION DATE
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NUMBER 2 COMPLETE THIS PORTION IF SELF-INSURED:

I have attached a copy of the permit to self-insure.

NUMBER 3 COMPLETE THIS PORTION IF EXEMPT:

I am not required to have workers' compensation insurance coverage because:

- I have no employees.
- I have employees but they are not covered by the workers' compensation law. (See Minn. Stat. § 176.041 for a list of excluded employees.) Explain why your employees are not covered: _____
- Other: _____

ALL APPLICANTS COMPLETE THIS PORTION:

I certify that the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify that I am authorized to sign on behalf of the business.

APPLICANT SIGNATURE (mandatory)	TITLE	DATE
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NOTE: If your Workers' Compensation policy is cancelled within the license or permit period, you must notify the agency who issued the license or permit by resubmitting this form.
This material can be made available in different forms, such as large print, Braille or on a tape. To request, call 1-800-342-5354 (DIAL-DLI) Voice or TDD (651) 297-4198.

610. Taxi License

610.01 License Required. No person shall engage in the business of carrying passengers for pay, wages, hire, or remuneration in any vehicle without first having obtained a license to do so.

610.02 Application. In addition to the information required by 601.02, each application shall state the number of vehicles to be operated; the license number of each vehicle; and the names and driver's license number of each person who will drive a vehicle for hire.

610.03 Drivers. No person shall serve as the driver of a vehicle for hire who has been convicted of any alcohol-related traffic offense within the prior five years or more than one traffic misdemeanor of any other sort within the previous twelve months.
Amended: 6/1/99 Ord. No. 180

610.04 Conditions. The council may impose reasonable additional conditions and requirements upon licensees. Such conditions and requirements may be in the form of an ordinance granting a nonexclusive franchise to operate motor vehicles for hire.