

Town of Milton 150 Mary Street Milton, ON L9T 6Z5

T 905 878-7252 x 2137 www.milton.ca

APPLICATION FOR VEHICLE FOR HIRE/ LIMOUSINE OWNER'S LICENSE							
All pages of this application are to be completed in full, as applicable.							
☐ Taxicab OWNER	Limous	ine OWNER	Accessible Taxi OWNER			☐ TNC OWNER	
Applicant's Information							
Applicant's Full Name:							
Home Address:							
City:					Postal Code:		
Home Phone:					SIN Number:		
Cell Phone:						Birth Date:	
Business Information							
Business Name:							
Street Address:							
City:							
Business Phone:					Postal Code:		
Business Fax:					Email Address:		
Licensing / Plate Information							
Other Town of Milton license(s) held with respect to taxicabs or limousines:							
Driver's License number(s)							
Owner's License number(s)							
Broker's License number(s)							
INFORMATION/DOCUMENTATION TO BE ATTACHED TO COMPLETED APPLICATION FORM:							
					Com	nments (Office use)	
BUSINESS Name – Proof of Registration							
VEHICLE – Proof of Ownership							
VEHICLE Proof of Liability Insurance (\$2M liability)							
VEHICLE SAFETY Certificate of Mechanical Fitness							
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Copy of incorporating document								
Affiliated to BROKERAGE – Yes: No: I	Brokerage Name:							
I certify that I am: (check one)								
the registered owner; or								
leasing the vehicle from a firm or company carrying on the business of leasing vehicles								
I understand that before an owner's license(s) will be granted, a certified copy of the required insurance or a certificate of such policy covering each vehicle must be provided.								
Signature								
I being the Licensed Taxicab Owner of Plate # pursuant to the Town of Milton Vehicles for Hire By-law, as amended; hereby, acknowledge that I have sold my Taxicab to the applicant(s) named herein and understand that the <i>Licensing Officer</i> may direct the issuance of a Taxicab <i>Owner's</i> License and the number of the Owner's Plate# to the applicant. I further acknowledge and understand that I no longer have the privileges of a Taxicab Owner's License in this regard.								
Applicant Name:								
Applicant's Signature:	Date:							
Transferring Taxicab Owner's Signature:	Date:							