



## **AUTO TRANSPORTATION SERVICE BUSINESS LICENSE APPLICATION CHECKLIST**

### **Please submit the following with your application:**

- Certificate of commercial liability insurance for each vehicle naming the City, its agents and employees as parties insured.
- Vehicle registration for each vehicle.
- Vehicle inspection for each vehicle completed by ASE certified mechanic and approved by Hailey Chief of Police or designated agent.
- Licensing fee of \$250.00.
- Fingerprinting fee of \$34.00 (if applicable).
- List of all drivers employed by your auto transportation service.
- Complete schedule of fares.
- Business License Renewal Application.

### **Please note:**

- Applicant must be at least 21 years of age and be the bona fide owner of the business.
- This license is valid for the business only. All drivers (including the owner if the owner is also a service driver) must have a valid Idaho driver's license and City of Hailey auto transportation service driver's license.
- All applications must be approved by the Hailey City Council and Chief of Police.



# AUTO TRANSPORTATION SERVICE BUSINESS LICENSE APPLICATION

## LICENSE FEES:

New or Renewal \$250.00  
(License application for full year Jan. 01 – Dec.31)

Fingerprint Processing \$34.00  
(If applicable)

**TOTAL:** \_\_\_\_\_

### OFFICE USE ONLY

NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_

POLICE CHECK \_\_\_\_\_

**EXPIRES ANNUALLY ON DECEMBER 31<sup>ST</sup>**

Business Name: \_\_\_\_\_

Owner Driver's License Number \_\_\_\_\_ Owner Date of Birth \_\_\_\_\_

Number of Vehicles Operated by Business \_\_\_\_\_

1. Have you within the last three (3) years: been convicted of, or received a withheld judgment, been placed on probation, forfeited a bond for failure to appear for any felony or misdemeanor charge, or have any outstanding warrants? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Have you had a similar license revoked, denied or suspended by this city or any other city of this state, or of the United States, within the past three (3) years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# VEHICLE INSPECTION FORM

(Please make copies as necessary. Submit for each vehicle)

Taxi name \_\_\_\_\_ Permit # \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Vin # \_\_\_\_\_ Vehicle License # \_\_\_\_\_

	Good	Fair	Need		Good	Fair	Need
<b>BRAKES</b>				<b>MIRRORS</b>			
Front				Left side			
Rear				Right side			
Park brake				Rear-view			
<b>EXHAUST SYSTEM</b>				<b>SEATBELTS</b>			
Exhaust pipe				Front seat			
Muffler				Rear seat			
Tail pipe							
				<b>STEERING</b>			
<b>EXTERIOR BODY</b>				Tire rods			
Right side				Knuckles			
Left side							
Front				<b>TIRES</b>			
Rear				Right front			
				Left front			
<b>GLASS</b>				Right rear			
Windshield				Left rear			
Rear window							
Side windows				<b>WIPERS</b>			
Left				Left			
Right				Right			
<b>LIGHTS</b>				<b>HORN</b>			
Head Lights							
High beam				<b>CLEANLINESS</b>			
Low beam				Exterior			
Brake lights				Interior			
Park lights							
Turn signals							
Left							
Right							
Interior							
Emergency flasher							

INSPECTED BY:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Business

APPROVED BY: \_\_\_\_\_  
CHIEF OF POLICE or agent

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221