



AUTO TRANSPORTATION SERVICE DRIVER'S LICENSE APPLICATION CHECKLIST

Please submit the following with your application:

- Color photo (passport size) to affix to the City of Hailey license.
- \$34.00 fingerprinting fee (if applicable). Exempt from fingerprint requirement if driver presents proof of a current records check submission with another local agency, in the same year that this application is filed, and the Hailey Chief of Police or City Council approves.
 - Copy of Ketchum Taxi Driver License for year applying.
- Copy of current Drivers License.

Please note:

- Applicant must be at least 21 years of age.



AUTO TRANSPORTATION SERVICE DRIVER'S LICENSE APPLICATION

Applicant Information

Name: _____

Mailing Address: _____

Physical Address: _____

Phone #: _____

Date of Birth: _____

Birthplace: _____

Idaho DL #: _____

Expiration Date: _____

How long have you been a resident of Hailey? _____

Have you been licensed as a taxi driver before? When and with what company?

Emergency Contact & Phone #: _____

Employer Information

Company Name: _____

Mailing Address: _____

Phone #: _____

Manager Name: _____

Previous Employer: _____

Mailing Address: _____

Phone #: _____

1. Have you within the last three (3) years been convicted of, or received a withheld judgement, 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: _____

3. Do you affirm that the information contained in this application is true and correct to the best of your knowledge?

Yes No

I hereby authorize the city of Hailey, its agents and employees to seek information and conduct an investigation into the truth of the statements set forth in this application. I understand that my license will expire annually on December 31st.

Official Use Only

New Renewal

Color Photo

Police Check Approved

Applicant Signature: _____

Date: _____