

City of Deadwood
100 Sherman Street
Deadwood, SD 57732

Phone: (605) 578-2623
Fax: (605) 578-1095



TAXI BUSINESS APPLICATION - \$750.00 Fee

I am aware of, and was given a copy of the City of Deadwood Taxi Regulations as well as read and understand the City of Deadwood Taxi Regulation: _____

Name of Company Owner/Manager

Renewal **New Application** For Year: _____

Business

Business Name (as will appear on license): _____

Business Address: _____

Business Phone: _____

Business Phone: _____

SD Sales Tax Number: _____  Verified by City Finance Office

If business is a partnership or corporation, please provide the name and address of each partner/officer.

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Person Completing Application

Applicant Name: _____

Home Address: _____

Home Phone/Cell Phone: _____ Date of Birth: _____

Is applicant also the contact person? Yes No If not, who is the contact person for this application:

Contact Name: _____ Address: _____

Home Phone/Cell Phone: _____

Location from which the vehicle(s) will operate: _____

Number of vehicles proposed to be operated: _____ Insurance Company: _____

Policy Number: _____ Expiration Date: _____

Previous experience in motor vehicle transportation business: _____

Vehicle Information-Additional \$200.00 fee per vehicle after the first, maximum of five.

| Year | Make | Model | License Plate Number | Vin Number |
|------|------|-------|----------------------|------------|
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Vehicle Inspection

A statement of inspection or a service record from an approved mechanic must be provided with this application of the above listed vehicles before license will be issued. A copy of the inspection or service record will be attached to this application and maintained on file with the Chief of Police.

Inspection or Service Record Received: _____
Date Received Signature of City Staff Receiving Application

City License Plate Decals Provided

Numbers Issued: 1. _____ 2. _____ 3. _____
4. _____ 5. _____

Application made this _____ day of _____, 20____

X

Applicant's Signature

TO BE COMPLETED BY THE CITY OF DEADWOOD

An annual fee of \$750.00, plus additional vehicle fees have been paid to the City Finance Office as recorded on:

| | |
|--|------------------------------------|
| Receipt No.: | Dated: |
| X | X |
| Approved by Deadwood Police Department | Approved by Deadwood Zoning Office |

License fee is not refundable

Submit completed application to:

City of Deadwood Chief of Police, 100 Sherman St., Deadwood, SD 57732 – (605) 578-2600

Requirements:

- 1. Proof of Insurance for the **business** as well as the **vehicles**
- 2. Proof of Vehicle Inspections

New Vehicles

| Year | Make | Model | License Plate Number | Vin Number |
|------|------|-------|----------------------|------------|
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