

**A criminal record and driver history check from the State of NH must be attached to this license application**



**CITY OF LACONIA**  
**APPLICATION FOR TAXI DRIVER'S PERMIT**  
**(PLEASE PRINT OR TYPE)**

**NEW RENEWAL (CHECK ONE)** DATE: \_\_\_\_\_

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

First Middle Initial Last

Date of Birth: \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Eyes \_\_\_\_\_ Hair Color \_\_\_\_\_

Phone No. \_\_\_\_\_

Address for the past ten (10) years. (Street or road name **must** be used, RFD #'s or Post Office Box #'s will not be accepted.)

1. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Present Address
2. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Previous Address
3. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Previous Address

Please list all states in which you hold or have held a valid operator's license. Please include your license number:  
\_\_\_\_\_  
\_\_\_\_\_

Employment for past ten (10) years. (Begin with present employment, listing backward for ten years. Also list the cab company you intend to work for.)

1. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_
2. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_
3. \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

(If additional space is needed, please use additional sheet)

Have you ever been convicted of a crime, which has not been annulled? Yes: "\*\*\*\*\*" No:

If the answer is yes, give charge, date, place of arrest and disposition. \_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a motor vehicle offense? Yes: "\*\*\*\*\*" No:

If the answer is yes, give charge, date, place of summons or arrest and disposition. \_\_\_\_\_  
\_\_\_\_\_

The information on the completed application form is true, correct and complete. I submit same and invite your reliance upon my statements for the purpose of obtaining a Taxi Cab Driver's Permit. By my signature below, I acknowledge notification that any false statement made on this application will be considered an "Unsworn Falsification," as defined by Revised Statutes Annotated 641:3 and am informed I may be prosecuted. I have been provided with a copy of RSA 641:3.

\_\_\_\_\_  
Signature Date

**( FOR CITY USE ONLY)**

Application Fee: \$25\*\*\*\*\* Received on (date): \_\_\_\_\_ By: \_\_\_\_\_

Licensing Board Approval on: \_\_\_\_\_ License Expires on: \_\_\_\_\_