2026 Taxicab Operator License Application

OWNER

CITY OF VINELAND
WHERE IT'S ALWAYS GROWING SEASON

For Office Use Only

Complete application filed: Date: _____

Time: _____

☐ New ☐ Renewal ☐ Transfer

☐ Cash ☐ Check # _____ Date: _____

FEES FOR 2026

☐ New Owners' License $126 for each taxicab.

☐ New Owner's License Public Safety Investigation Fee: $126 per applicant.

☐ **Renewal** of Owner's License and Taxicab Inspection Fee: $126 for each taxicab.

☐ Transfer of Owner's License $126.00

Police Department Use Only

☐ APPROVED

☐ DENIED for the following:

_____

_____

_____

Director of Public Safety/Police Chief

Date: _____

CITY LICENSE NUMBER: _____

All licenses expire December 31 annually and must be renewed in a timely fashion.
Licenses are not transferable.

PRINT all information legibly.

Name of taxi ownership business entity: _____

Full legal name of individual: _____

Residence address (P.O. Box is not acceptable): _____

_____

Birth date: Month:_____ Day: _____ Year: _____ Present Age: _____

Height: _____ Eye Color: _____

E-mail address: _____

Social Security Number: _____- _____ - _____

NJ Driver's License Number: _____ Exp. Date _____

Telephone: Home: (_____) _____Mobile: (_____) _____

Cab dispatch company with whom you are affiliated (circle one): Yellow Cab Green Cab Other

Have you ever been licensed to operate a Taxicab? ☐ No. ☐ Yes. Where? _____

Has your license to operate a taxicab ever been revoked? ☐ No. ☐ Yes. For what cause?_____

If ***PARTNERSHIP***, the following questions must be answered for EACH partner or member (use additional sheets if necessary):

Business Name: _____

Telephone No.: (_____) _____

Name of Partner/Member: _____

Residence (Street, City, State, Zip): _____
_____

Home Telephone No. _____

Have any of the above partners ever been licensed to operate a taxicab?

No. ☐ *Yes.* ☐ *Who, when, and where?* _____

Were any such licenses ever revoked?

No. ☐ *Yes.* ☐ *Who, when, and where?* _____

If a ***CORPORATION*** *or* ***ASSOCIATION*** *the following must be answered: (attach a copy of the certificate of incorporation and a certified copy of the corporate resolution authorizing this application).*

Name of Corporation: _____

Telephone No.: (_____) _____

Business Address: _____

President: _____ Phone: _____

Residence (Street, City, State, Zip): _____

Secretary: _____ Phone: _____

Residence (Street, City, State, Zip): _____

Treasurer: _____ Phone: _____

Residence (street, City, State, Zip): _____

Have any of the above officers ever been licensed to operate a taxicab?
No. ☐ *Yes.* ☐ *Who, when, and where?* _____

Have any such licenses ever been revoked?
No. ☐ *Yes.* ☐ *For what cause?* _____

DESCRIPTION OF VEHICLE TO BE LICENSED:

Year: _____ Make: _____ Model: _____

Seating capacity: _____ NJ State License Plate No.: _____

Vehicle Identification No. # _____

Insurance Provider: _____ Policy # _____

Insurance expiration date: _____

Provide two (2) references of persons residing in Vineland:

Reference #1 : Name: _____

Address: _____

Telephone Number: (_____) _____

How do you know this person? _____

Reference #2 : Name: _____

Address: _____

Telephone Number: (_____) _____

How do you know this person? _____

Affidavit of Applicant

In consideration of granting a Taxicab Owner's License, the Applicant agrees to and accepts the terms, conditions, limitations and restrictions contained in City of Vineland Ordinance No. 2007-79, as amended. The Applicant affirms that he or she has adequately provided for the safety of children under the age of five (5) years who are passengers in a taxicab operated by him or her. The applicant further affirms that there is a written policy setting forth that, prior to the operation of the taxicab, children eighteen (18) months of age or younger who are passengers in a taxicab shall be placed in a federally approved child restraint seat and that children over the age of eighteen (18) months but under the age of five (5) years must be placed in a car seat if riding in the front seat of a taxicab or in a lap and/or lap and shoulder harness seat belt if riding in the rear seat of a taxicab.

By affixing my signature below, I affirm the following license conditions are true and I certify that this application contains no willful misstatement of fact or omission of material fact and I am aware that if any of the statements made by me are willfully false, I am subject to license revocation and subject to any other penalties, fines and disciplinary action provided by law.

- I, and all partners, corporate officers and members of the limited liability company applicant, am/are at least eighteen (18) years of age.
- I, and all partners, corporate officers and members of the limited liability company applicant, am/are legal citizens and residents of the United States.
- I possess a valid New Jersey drivers license (attach copy)
- I am able to communicate in the English language.

- I, and all partners, corporate officers and members of a limited liability company applicant, have not been convicted of any indicatable offense in this State or its equivalent in any other State.
- I, and all partners, corporate officers and members of the limited liability company applicant, have not been convicted of any drug or alcohol related offenses.

Applicant **sign in presence of a Notary**: _____

Date: _____

For Notary Public:

State of New Jersey, _____ County

_____ , being duly sworn according to law, upon his oath deposes and says that he is the within named Applicant; that the answers to the foregoing statements contained therein are true to the best of his knowledge and belief.

Sworn to and subscribed before me this _____ day of _____

_____

Notary Public of New Jersey

Note: Upon filing this application with the City Clerk, it will be forwarded for investigation by the City of Vineland Police Department. After the City Clerk receives a written report from the Police, the application will be considered by City Council for approval or denial, if an owners' license is available. In the event a license is not available, the application will be kept on file as directed according to prevailing ordinance provisions.

All applicants must provide a copy of the insurance policy of a company duly licensed to transact business under the insurance laws of the State of New Jersey, conditioned for the payment of a sum of not less than $1,500,000.00 to satisfy all claims for damages, by reason of bodily injury to, or the death of, any person or person, resulting from, or on account of , an accident, by reason of the ownership, operation, maintenance, or use of such autocab upon any public street; and to satisfy any claim for damages to property of any person or persons, resulting from, or on account of, an accident, by reason of the ownership, operation, maintenance, or use of such autocab upon any public street.

(N.J.S.A. 48:16-3, effective 7/01/2024)