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# Application for Taxi Operator License

The City of Orange Township, New Jersey
**Department of Planning & Economic Development**
**Licensing Division**

**This form is for use in applying to the City of Orange Township for an annual taxi operator license (initial or renewal).** This is not an application for a taxi company/vehicle license, which is required for all taxi companies and taxi vehicles. Each applicant shall: (1) be 21 years of age or older; (2) be of sound physique, with good eyesight and not subject to or any other infirmity that might render him/her unfit for the safe operation of a taxi, and not addicted to the use of intoxicating liquors or controlled dangerous substances; (3) be able to communicate in English; (4) be clean of dress with the company's name visible on the shirt; (5) provide affidavits of good character from 2 reputable U.S. residents who have known the applicant personally for at least 1 year; (6) provide an affidavit from a taxi company licensed in the City promising the applicant employment as a taxi operator; (7) provide a valid driver's license issued by the State of New Jersey; (8) within 10 days of submitting the application, provide a copy of the applicant's driver history abstract issued by the New Jersey Motor Vehicle Commission; and, (9) a written criminal background report issued by the New Jersey State Police (additional fee, visit http://www.njsp.org for more information). Any change in residence of the taxi operator shall be reported in writing to the Department of Planning & Economic Development within 10 days of such change

All applications must be accompanied by a nonrefundable fee of $75.00, payable to the "City of Orange Township". Each taxi operator license is valid through the next-subsequent November 14, regardless of application date, and a renewal application must be received on or before November 15 of each year to avoid penalty. Submission of an application to the City does not constitute approval of a license; and, the City reserves the right to accept or reject any application as determined appropriate in accordance with applicable law.

**NOTE:** No more than 12 taxi operator licenses may be issued to a taxi company at any given time.

## Part A Taxi Company Information

| Taxi Company Name | | | FEIN/TIN |
|---|---|---|---|
| | | | |
| **Taxi Company Address** | **Main Phone** | **Fax** | **E-mail** |
| | | | |

## Part B Operator-Applicant Information

☐ INITIAL ☐ RENEWAL

| Operator-Applicant Name | New Jersey Driver License No. | Expiration | SSN | Height | Weight |
|---|---|---|---|---|---|
| | | | | | lbs. |

| Marital Status | Place of Birth | DOB | Eye Color | Hair Color |
|---|---|---|---|---|
| ☐ Single ☐ Married/Civil Union ☐ Separated ☐ Divorced | | | | |

| Home Address | E-mail | Mobile Phone |
|---|---|---|
| | | |

List all places of residence for the past 5 years (use additional sheets if necessary):

| Dates | Address |
|---|---|
| | |
| | |
| | |
| | |
| | |

Previous Employer Name & Address

Have you ever been convicted of a disorderly persons offense or any crime of the 4th degree or higher in the State of New Jersey, or its equivalent in any other state or federal jurisdiction? (if yes, provide explanation) ☐ No ☐ Yes

Are your driving privileges in this or any other state currently suspended? (if yes, provide explanation) ☐ No ☐ Yes

## Part C Applicant Certification

I hereby certify that the foregoing statements by me are true. I understand that if any of the foregoing statements made by me are willfully false, this application may be denied.

| Applicant Signature | | Notary | | |
|---|---|---|---|---|
| | | | | |
| **Name** | **Date** | **Name** | **License State** | **Expiration** |
| | | | | |

**FOR OFFICE USE**

| Police Department: | Date: | Granted ☐ Y ☐ N | Year | Fee Paid | Method | Date Rec'd | Receipt No. |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

Rev/0521

**CITY OF ORANGE TOWNSHIP, NEW JERSEY**
**DEPARTMENT OF PLANNING & ECONOMIC DEVELOPMENT**
**Licensing Division**

# CHARACTER REFERENCE

## Application for Taxi Operator License

Applicant Name:

## Part A Character Reference Information

| Name | Address | Phone |
|---|---|---|
| | | |

| | |
|---|---|
| How long have you known the applicant (must be at least 1 year)? | |
| Is the applicant related to you in any way? (if yes, provide details) | ☐ No ☐ Yes |
| Have you ever employed the applicant in any capacity? (if yes, provide details) | ☐ No ☐ Yes |
| Would you employ the applicant now if the opportunity existed? | ☐ No ☐ Yes |
| Have you ever provided a character reference for any other taxi operator license applicant in the City of Orange Township? (if yes, provide details) | ☐ No ☐ Yes |

## Part B Affidavit

**STATE OF _____:**
**COUNTY OF _____: ss.**

I, _____, of full age, upon my oath or affirmation, hereby state as follows:

1. I have known the applicant for at least 1 year;
2. during that time, I have observed the applicant's conduct and found him/her to be of good moral character and not addicted to the use of intoxicating liquor or illegal substances; and,
3. I know nothing that would preclude this applicant from being granted a taxi operator license, and affirmatively recommend him/her to the City of Orange Township for a taxi operator license.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment and the applicant's license may be denied.

| Signature | | Notary | | |
|---|---|---|---|---|
| Name | Date | Name | License State | Expiration |
| | | | | |

**FOR OFFICE USE**

Notes

**CITY OF ORANGE TOWNSHIP, NEW JERSEY**
**DEPARTMENT OF PLANNING & ECONOMIC DEVELOPMENT**
**Licensing Division**

# CHARACTER REFERENCE

## Application for Taxi Operator License

Applicant Name:

## Part A Character Reference Information

| Name | Address | Phone |
|---|---|---|
| | | |

| | |
|---|---|
| How long have you known the applicant (must be at least 1 year)? | |
| Is the applicant related to you in any way? (if yes, provide details) | ☐ No ☐ Yes |
| Have you ever employed the applicant in any capacity? (if yes, provide details) | ☐ No ☐ Yes |
| Would you employ the applicant now if the opportunity existed? | ☐ No ☐ Yes |
| Have you ever provided a character reference for any other taxi operator license applicant in the City of Orange Township? (if yes, provide details) | ☐ No ☐ Yes |

## Part B Affidavit

**STATE OF _____:**
**COUNTY OF _____: ss.**

I, _____, of full age, upon my oath or affirmation, hereby state as follows:

1. I have known the applicant for at least 1 year;
2. during that time, I have observed the applicant's conduct and found him/her to be of good moral character and not addicted to the use of intoxicating liquor or illegal substances; and,
3. I know nothing that would preclude this applicant from being granted a taxi operator license, and affirmatively recommend him/her to the City of Orange Township for a taxi operator license.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment and the applicant's license may be denied.

| Signature | | Notary | | |
|---|---|---|---|---|
| Name | Date | Name | License State | Expiration |
| | | | | |

**FOR OFFICE USE**

Notes

**CITY OF ORANGE TOWNSHIP, NEW JERSEY**
**DEPARTMENT OF PLANNING & ECONOMIC DEVELOPMENT**
**Licensing Division**

# PROMISE OF EMPLOYMENT

## Application for Taxi Operator License

Applicant Name:

### Part A Taxi Company/Owner Information

| Taxi Company Name | | | FEIN/TIN |
|---|---|---|---|
| Taxi Company Address | Main Phone | Fax | E-mail |
| Owner Name | Owner Address | | Mobile Phone |

### Part B Affidavit

**STATE OF NEW JERSEY :**
**COUNTY OF ESSEX : ss.**

I, _____, of full age, upon my oath or affirmation, hereby state as follows:

1. I am the owner of the above-named taxi company, which is licensed by the City of Orange Township;
2. I intend to employ the above-named applicant as a taxi operator provided he/she qualifies for and receives a taxi operator license from the City of Orange Township; and,
3. upon the termination of employment of the applicant for any reason whatsoever, he/she will be notified that he/she shall not use the same vehicle or taxi operator license if employed by another company in the City of Orange Township and must surrender the taxi operator license to the City of Orange Township, Department of Planning & Economic Development, Licensing Division.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment and the applicant's license may be denied.

| Owner Signature | | Notary | | |
|---|---|---|---|---|
| Name | Date | Name | License State | Expiration |

**FOR OFFICE USE**

Notes