



FINANCE

2020 Center Street, Berkeley, CA 94704 Tel: 510.981.7200 TDD: 510.981.6903 Fax: 510.981.7210
Email: Finance@ci.berkeley.ca.us

CITY OF BERKELEY
**AUTOMOBILE FOR HIRE
BUSINESS OWNER'S APPLICATION**

- \$350.00 -
(Page 1 of 2)

Please Type or Print Clearly

Business Name: _____

Last Name _____ First Name _____

Street Address _____

City: _____ State _____ Zip _____

Home Phone #: (____) _____ Message or work phone #: (____) _____

Email Address: _____

Federal Taxpayer Identification or social Security Number: _____
(if you have employees you are required to provide a Federal I.D. Number)

Number of vehicles owner wishes to operate in the City of Berkeley: _____

List the last (5) five digits of *each* vehicle identification number:

Attach a *copy* of the company's fictitious name statement and a color photograph of your taxi color scheme.

Number of employees working in Berkeley: _____



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List below *each* employee's name, address, age and drivers license number.

Employees Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Age: _____ Driver's License Number: _____

Employees Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Age: _____ Driver's License Number: _____

Employees Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Age: _____ Driver's License Number: _____

Employees Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Age: _____ Driver's License Number: _____

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Age: _____ Driver's License Number: _____

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CITY OF BERKELEY TAXI CAB APPLICATION

Date: _____ Taxi Company: _____ Cab #: _____
License Plate #: _____ VIN #: _____

Acceptance of Taxi Cab Application:

_____ Date stamp packet. []

_____ Business license application.

_____ Owner's Application

_____ Vehicle Permit application. []
 Inspection Certificate. []
 Weights & Measures. []
 Vehicle registration. []
 Insurance policy. []

_____ Copy of Fictitious Name statement. []

_____ Upon approval, a color photo of your taxi color scheme and fictitious name is required and each vehicle operating under said license shall be painted pursuant to the photo submitted.

Specifications:

_____ Every vehicle shall have conspicuously displayed name of the business owner, address, and telephone number in addition to the rates displayed in the front and rear of the vehicle. []

_____ Rear door and each side door must have name of owner.
 Letters not less than 2 ¼" in height.
 Letters not less than 5/16" in stroke. []

_____ The dome light should read the business name or taxi company. []

_____ The number of the cab is required on each side of the vehicle, on the leading edge of the front door and left side of the outside rear of the vehicle, not less than 3 ½" in height and not less than ½" in stroke.



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CITY OF BERKELEY VEHICLE PERMIT APPLICATION (Page 1 of 2)

Each vehicle for hire operating in the City must be subject to a vehicle permit from the Finance Department. Each vehicle for hire is operated by a business owner who has obtained a business owner's permit and any driver of such vehicle for hire has been issued a driver's permit within the City limits. Each vehicle permit is \$75.00.

Please Type or Print Clearly

Business Name: _____

Owner's Name: _____

Street Address _____

City: _____ State _____ Zip _____

Home Phone #: (____) _____ Message or work phone #: (____) _____

Email Address: _____

Vehicle Permit Checklist:

Attach a copy for each vehicle all necessary documentation required to process your application. Do not submit paperwork for processing if all necessary documentation is not attached.

_____ Vehicle Inspection Certificate _____ Weights and Measures Certificate

_____ Vehicle Registration _____ Insurance Policy

_____ Insurance Company (not producer)

Insurance Company's Address: _____

City: _____ State: _____ Zip: _____

Insurance Company's Phone Number: _____

