



Department of Regulatory Services
Licenses and Consumer Services
350 South 5th Street - Room 1-C City Hall
Minneapolis, MN 55415-1391
612-673-2050
www.minneapolismn.gov/business-licensing

License Renewal Application Checklist – Taxi Driver

Complete the following five items and mail to:

Licenses and Consumer Services
350 South 5th Street - Room 1-C City Hall
Minneapolis, MN 55415-1391

- 1. **Signed lower portion of the original License Annual Billing Statement** (gray sheet enclosed). If this is lost, you must submit your application in person at 1C City Hall. This may cause a delay in the processing of your license.
- 2. **License Renewal Application – Taxi Driver Form** on reverse side. **Be sure to include your email address on the application.** Replacement forms are available at www.minneapolismn.gov/licensing/taxi/index.htm.
- 3. **Attach a Criminal History Report.** A copy may be obtained from www.cch.state.mn.us / (New Criminal History) or the State of Minnesota Bureau of Criminal Apprehension, 1430 Maryland Ave E. St. Paul, MN 651-793-2400. This report must be dated within 30 days of receipt of this application.
- 4. **Attach a legible copy of your current Minnesota Driver License** displaying your current address.
- 5. **\$59 Application Fee.** Make checks payable to the Minneapolis Finance Department.

Your Minneapolis taxi driver license expires on June 30, 2013

Mail in your application by June 14, 2013.

- 1. You are no longer required to renew your license in person at 1C City Hall.
- 2. Your Service Company will receive your new license before Friday, June 28, 2013 if your application is postmarked/submitted by June 14, 2013.
- 3. Your 2014 license will not be processed while you wait at our office. You must pick it up from your Service Company.

Applications must be complete.

- 1. A complete application includes all five items above. Incomplete applications will be returned to your Service Company. A 20% late penalty will be charged to applications regarded as incomplete and not resubmitted to our office by Friday, June 28, 2013.
- 2. All outstanding fines must be paid at 1C City Hall before you will receive your new license.

Don't be late.

- 1. If your application is postmarked/received after June 14, 2013, we cannot guarantee your Service Company will receive your new license by Friday, June 28, 2013. You will not receive your 2014 license while you wait at our office.
- 2. If your application is postmarked/submitted after June 30, 2013, your license is expired. A 20% late penalty will be charged and you may be subject to enforcement action.



City of Minneapolis
 Licenses and Consumer Services
 350 South 5th Street – Room 1C
 Minneapolis, MN 55415–1391
 Phone: 612-673-2050
 Fax: 612-673-3399 TTY: 612-673-2157
www.minneapolismn.gov/business-licensing

LICENSE ID #
CSR:
Date:

LICENSE RENEWAL APPLICATION – TAXI DRIVER

BACKGROUND INFORMATION

Applicant's Name (Last, First, MI)		E-mail Address	
Address	City	State	Zip Code
Is this a new address? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach a copy of your new Minnesota Driver's license or temporary receipt.	Social Security Number	Telephone Number	
Driver's License Number	Expiration Date	Date of Birth	
DOT Medical Card Expiration Date	Name of Issuing Clinic	Telephone Number of Clinic	
Have you been convicted of a crime in the past five years? <input type="checkbox"/> YES <input type="checkbox"/> NO	Do you have an outstanding warrant in Minnesota or any other state? <input type="checkbox"/> YES <input type="checkbox"/> NO		

SERVICE COMPANY

I verify that the provisions of Section 341.960 of the Minneapolis Code of Ordinances have been completely complied with and the statements made in this application are true to the best of my knowledge and belief.

PRINTED NAME _____ SERVICE COMPANY _____

SIGNATURE _____ DATE _____

DATA PRIVACY ADVISORY

The Minnesota Data Practices Act requires that you be advised of the following information:

As an applicant for a Minneapolis business license, you are asked to provide private and/or confidential information about yourself that will be used to check driving history, criminal history, arrest records, warrant information, and other relevant records.

You may refuse to provide this information. However, should you refuse, our investigation cannot be completed and will result in your application not being processed.

The information you provide is public and will be used by the Minneapolis Police Department, the Minneapolis Division of Licenses and Consumer Services, the Minneapolis City Council and/or the general public.

This AUTHORIZATION FOR RELEASE OF INFORMATION will expire two years from the date you sign it.

I have read and understand the above Data Practices Advisory.

Signature _____ Date _____

VERIFICATION

The data which you furnish on this application will be used by the City of Minneapolis to assess your qualifications for licensure. This information is required by law. Disclosure of this information is voluntary. You are not legally required to provide this data, however if you fail to do so, the City of Minneapolis may be unable to process this application. Disclosure of your Social Security number is required by Minnesota Statutes 270C.72 and your Social Security number may be requested by and released to the Minnesota Commissioner of Revenue. After issuance of a license, all information contained in this application, except your Social Security Number, will be public information pursuant to Minnesota Statutes, Chapter 13. The information provided above will be verified by the Minnesota Department of Labor and Industry and individuals are subject to a \$2,000 penalty if the information is false.

A SIGNATURE IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the foregoing is true and correct. All information given is subject to verification by the State of Minnesota.

SIGNATURE OF APPLICANT _____

DATE _____