



CITY OF CLAYTON
10 N. BEMISTON AVE., CLAYTON, MISSOURI 63105

APPLICATION FOR TAXICAB STAND

This form is to be completed in accordance with the provisions of the Clayton City Code pertaining to taxicab stands (Section 355.070). Please print.

1. Company name: _____

2. Address: _____
Street City State Zip

Is this the mailing address? If not, please provide.

Mailing Address: _____
Street City State Zip

3. Contact Person: _____

4. Phone Number: _____ Email: _____

5. License year in which you are applying for: **July 1st, 20__ - June 30th, 20__**

6. Number of permits applying for: _____ **limited to two (2) permits.*

1st permit fee is \$400.00

2nd permit fee is \$800.00 (for a total of \$1200.00 for two permits)

7. Taxicab color scheme: _____

8. Is applicant a _____ Partnership or _____ Corporation

If a partnership, attach the names and addresses of all partners.

If a corporation, attach the names and addresses of all officers and directors thereof.

