



TAXICAB STAND APPLICATION

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, 2021 - June 30th, 2022**

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.

