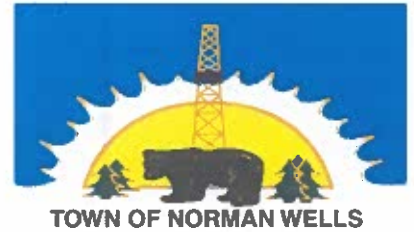


TOWN OF NORMAN WELLS
By-law No. 09-27
Application for Taxi Business License



Name of Company: _____

Ltd. Company _____

Partnership _____

Proprietorship _____

Director or Agent: _____

Mailing Address: _____

Location of Office: _____

Telephone & Fax: _____

I, _____ representing _____

of _____ Norman Wells, NT _____, declare that the company:

- i) holds a valid and subsisting License issued pursuant to the Business By-law of the Town of Norman Wells (License No. _____);
- ii) has had a certified mechanical inspection by a certified, licensed mechanic completed within fifteen (15) days of the date of this application;
- iii) has provided proof of valid registration and insurance (copy attached hereto);
- iv) every taxi operating will display the licence in a prominent place within the taxi(s) at all times.

During the year ending _____, 2023, at Norman Wells, N.W.T.

Application for Taxi Business License

The Taxi(s) are described as follows:

<u>Make</u>	<u>Year</u>	<u>Model</u>	<u>Serial No.</u>	<u>License No.</u>

I understand that any false statements made or implied on this form are grounds for refusal or revocation of the license applied for.

Date

Signature

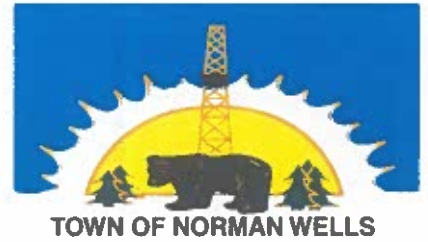
Witness

Name of Business

Approved / Not Approved this _____ day of _____, 20__.

Senior Administrative Officer
Town of Norman Wells

TOWN OF NORMAN WELLS
By-law No. 09-27
Application for Taxi Driver's Permit



Name of Appointed Driver: _____

Address: _____

Telephone: _____

YES

NO

Has obtained the full age of Nineteen (19) years.

Has a valid Class 1, 2, 3, or 4 license issued under the Vehicles Act of the Northwest Territories (copy attach.).

Has a written offer of employment from the licensee (copy attach.).

Has paid the fee of \$25.00 (per annum) and has obtained a certified copy of By-law #09-27.

Has provided proof at time of application, that he or she has undergone and passed a complete medical examination with the previous years (copy attach.).

Has obtained a Certificate of Criminal and Driving Convictions signed by a member of the RCMP (copy attach.).

Approved / Not Approved this _____ day of _____, 2023.

Senior Administrative Officer
Town of Norman Wells

TAXI PERMIT

is hereby permitted to use vehicle:

Serial No.

Registered Owner:

License No.:

Mechanical Inspection:

Vehicle Registration Expires:

Vehicle Insurance Expires:

*This permit is granted subject to the compliance of all applicable By-Laws of the Corporation of the Town of Norman Wells, Territorial Ordinances and other Statutes, and unless otherwise forfeited, will expire on **December 31, 2023.***

Date: _____, 2023

No: