

POLICE DEPARTMENT
CITY OF BEAUFORT
PO. BOX 898
BEAUFORT, S.C. 29902



APPLICATION FOR CITY DRIVER'S PERMIT

This form is used to apply for a City Driver's Permit to operate public motor passenger vehicle(s) in the City of Beaufort in accordance with City Ordinances. The information requested herein is voluntary and necessary for determining eligibility.

READ CAREFULLY AND GIVE COMPLETE ANSWERS TO ALL QUESTIONS ON THIS FORM. ANSWERS SHOULD BE TYPED, WRITTEN OR PRINTED IN INK REFUSAL TO ANSWER ANY QUESTION OR KNOWINGLY MAKE A FALSE ENTRY WILL BE JUSTIFICATION FOR DENYING THE PERMIT.

NAME: _____
(Last) (First) (Middle) (Jr., Sr., III)

ADDRESS: _____
(No. & Street) (City) (State) (Zip Code)

MAILING ADDRESS: _____
(If Different from residence) (Phone #)

DATE OF BIRTH: _____ SSN: _____
(Month) (Day) (Year) (XXX-XX-XXXX)

SEX: Male _____ Female _____ Height _____ Weight _____ Eyes _____ Hair _____
(Inches) (Pounds)

SOUTH CAROLINA DRIVER'S LICENSE NUMBER: _____

(NAME OF TAXI COMPANY WHERE YOU ARE EMPLOYED OR WILL BE EMPLOYED)

YEARS EXPERIENCE AS A DRIVER: CAR _____ TAXI _____ BUS _____ TRUCK _____
YES NO

- 1. Have you any physical disability? If yes, explain on back of application.
- 2. Where you ever a patient in or committed to an institution for the insane or feeble minded?
- 3. Have you ever suffered from: Paralysis__ Heart Condition__ Epilepsy__ Stroke__?
- 4. Have you ever been addicted to intoxicating liquors or drugs?
- 5. Have you ever been convicted of an offense involving liquor, drugs, or moral turpitude?
- 6. Have you ever previously applied for chauffeur's or taxi driver's permit? If so, where _____ (City), _____ (State).
- 7. Have you ever been convicted or forfeited bond for any motor vehicle traffic violation? If yes, explain on back of application.
- 8. Has your license from any state ever been denied, cancelled, suspended or revoked? If yes, Explain on back of application.

(OVER)

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I, the undersigned, hereby certify that all information given and statements made herein are true and correct and further certify I do not have access to a valid driver's license other than is shown in this application. I further certify that I will comply with the city ordinances concerning the operation of taxi, limousine, or mini-buses in the City of Beaufort, South Carolina.

(Signature of Applicant)

Subscribed to before me, _____
A notary public, this _____ day of _____ 20____

(Signature of Notary Public)

My Commission Expires:

Remarks:

FOR INTERNAL USE ONLY Local Records _____ Criminal History _____ NCIC Records _____ Fingerprints _____
(Signature of Investigator)
APPROVED <input type="checkbox"/> DISSAPPROVED <input type="checkbox"/>
(Signature of Chief of Police)
Permit No. _____ Expiration Date _____