



Town of Milton  
 150 Mary Street  
 Milton, ON L9T 6Z5

T 905 878-7252 x 2137  
 www.milton.ca

**APPLICATION FOR VEHICLE FOR HIRE /LIMOUSINE DRIVER'S LICENSE**

- Taxicab Driver
- Accessible Taxicab Driver
- Limousine Driver

**Personal and Business Information**

**Applicant's Home Address / Personal Information**

Applicant's Name (Last Name, Given Names):

Home Address:

City:

Home Phone:

Postal Code:

Cell Phone:

Driver's License #:

Email Address:

Birth Date (Month, Day, Year):

**Applicant's Business Contact Information**

Employer's Name:

Business Address:

City:

Postal Code:

Business Phone:

Business Fax:

**INFORMATION/DOCUMENTATION TO BE ATTACHED TO COMPLETED APPLICATION FORM:**

DOCUMENT NAME	FOR OFFICE USE ONLY	
Driver's License	Expiry Date:	
Police Clearance Check	Original - within last 60 days	
MTO - Driver's Abstract	Original - within last 60 days	
Letter of Employment	(from Taxi Brokerage)	
License Fee		

PERSONAL INFORMATION ON THIS FORM IS COLLECTED UNDER THE AUTHORITY OF THE MUNICIPAL ACT 2001, S.O. 2001, AS AMENDED, AND WILL BE USED TO ASSESS APPLICATIONS FOR AND TO ISSUE TAXICAB OR LIMOUSINE DRIVER LICENSES AND THAT THE INFORMATION MAY BE PROVIDED TO THE CHIEF CONSTABLE UPON REQUEST.



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**Signature**

I hereby acknowledge that I have been provided with a copy of and have read and understand the regulations as set out in Town of Milton, Vehicles for Hire By-law, as amended and certify that all information provided herein is true. I also acknowledge that personal information collected as part of the application process for licenses is subject to release to the Chief Constable as and when requested by him or her.

Applicant Name:

Signature:

Date: