



CITY OF PITTSFIELD

Taxicab Commission, City Hall, 70 Allen Street, Room 103,
Pittsfield, MA 01201, (413) 499-9363 Fax (413) 499-9463

Instructions for completing application:

TYPE OF LICENSE: VEHICLE FOR HIRE - TAXICAB

**Completed application must be submitted at least fifteen (15) days prior to date of hearing.
Applications submitted without all the required documentation will not be accepted.**

- ___ Obtain a Federal Identification (FID) Number from Internal Revenue Service located at 333 East Street, Pittsfield: (413) 499-2206.
- ___ If new business or new ownership: File with Assessor's Office for personal property taxes and File business certificate (doing business as) in City Clerk's office for \$25.00.
- ___ Submit completed application along with zoning verification with copy of floor plan/plot plan signed by Building Inspector and Fire Department.
- ___ If the applicant does not own premises, submit a letter from the owner granting permission for purposed use.
- ___ Proof of workmen's compensation must be submitted when picking up the license.
- ___ **A Public hearing is required and a legal notice must be published. Please include a check in the amount of \$13.50, payable to the Pittsfield Gazette to be submitted with application.** A hearing will be scheduled at next licensing board meeting following receipt of application. Legal ad must be published at least ten (10) days prior to hearing.
- ___ Applicant must notify abutters of premises, within three (3) days of publication of legal ad, by certified mail, return receipt requested. Affidavit of such mailing to be filed with this office together with return certified receipt(s) and copy of legal notice attached. An abutter is a person whose property directly touches the proposed premises and within 300 feet of premises. **It is recommended that the applicant also notify all tenants of building proposed business is located by first class mail or hand deliver.**
- ___ After receiving approval of taxi company from the taxi commission submit proof of insurance and completed vehicle applications signed by: police department, Office James McIntyre (499-9700) and sealer of weights and measures, located at City Hall.

Fee: \$10.00 annually (per vehicle) - Please make checks payable to the City of Pittsfield.

License period runs January 1 - December 31



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PETITION FOR A VEHICLE FOR HIRE LICENSE - TAXICAB

I, WE, the undersigned hereby petition for a license to operate the following described vehicle as a limousine, subject to all applicable provisions of law and of the ordinances of the City of Pittsfield during the license period ending April 30th.

Business Information:

Name: _____ d/b/a _____
Address: _____ City: _____ State/Zip: _____
Telephone: _____ Cell: _____
Email: _____
Name of Manager: _____

Owner Information:

Name: _____
Address: _____ City: _____ State/Zip: _____
Telephone: _____ Cell: _____
Email: _____

The issuance of this license herein is based in part from the presentation contained in the application, and any misrepresentation may be cause for revocation by the licensing authority.

Signature: _____ Date: _____

I hereby swear under the pains and penalties of perjury that the information I have given is true to the best of my knowledge and belief.

Please fill out one for each vehicle and provide a photocopy of the certificate of registration

Make and Type of Vehicle: _____

Capacity-Exclusive of Driver: _____

VIN #: _____

Registration #: _____

Make of Taximeter: _____ Taximeter #: _____

Copy of the certificate of registration for this vehicle submitted: YES NO

ABOVE DESCRIBED VEHICLE INSPECTED AND APPROVED AS TO SAFETY, CLEANLINESS AND APPEARANCE

Chief of Police or Designated Officer

Date _____

ABOVE DESCRIBED TAXIMETER TESTED AND CERTIFIED

Sealer of Weights and Measures

Date _____

Signature: _____ Date: _____

I hereby swear under the pains and penalties of perjury that the information I have given is true to the best of my knowledge and belief.

FEE: \$10.00 ANNUALLY



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LICENSEE PERSONAL INFORMATION SHEET

(Information sheet must be completed for each owner and/or manager)

Name: _____
Address: _____ City: _____ State/Zip: _____
Telephone: _____ Cell: _____
Email: _____
SSN: _____ U.S. Citizen: ____ Yes ____ No
Father's Name: _____
Mother's Name: _____
Have you ever been convicted of a violation of the law: ____ Yes ____ No

IS SO, GIVE DETAILS _____

PRIOR BUSINESS EXPERIENCE: _____

EMPLOYMENT FOR THE LAST FIVE YEARS (DATES, POSITION, EMPLOYER, ADDRESS AND TELEPHONE NO.)

HOURS PER WEEK TO BE SPENT ON THE LICENSED PREMISES: _____

Signature: _____ Date: _____

I hereby swear under the pains and penalties of perjury that the information I have given is true to the best of my knowledge and belief.

AFFIDAVIT OF THE MAILING OF NOTICES OF THE FILING OF AN APPLICATION FOR A TAXICAB LICENSE

To be completed and signed by the applicant and filed at the office of the Taxicab Commission.

In accordance with the requirements of the City of Pittsfield Taxicab Commission, I hereby declare that on the _____ day of _____, 20____, I sent by certified mail, return receipt to the persons hereinafter listed notices, a copy of which is attached hereto, of the filing with the Taxicab Commission of the City of Pittsfield, by the undersigned of an application for a license to conduct and maintain a TAXI COMPANY, at _____ in said Pittsfield.

| NAME | ADDRESS |
|-------|---------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

SIGNED UNDER THE PENALTIES OF PERJURY

Signature of Applicant

On this ____ day of _____, 20__ before me, the undersigned notary public, personally appeared, _____ proved to me through satisfactory evidence of identification, which was _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that she/he signed it voluntarily for its stated purpose.

Notary Public