

VEHICLE TRANSFER INFORMATION SHEET

REQUIREMENTS

- Vehicle Transfer Application (Attached)
- Vehicle Information
 - ✓ Vehicle Title/Memorandum Title
 - ✓ Vehicle Registration
 - ✓ Mechanical Inspection
 - ✓ Proof of Vehicle Insurance
 - ✓ Taxi Meter Inspection

PRICING

- Application fee - \$20.00
- Vehicle Transfer fee - \$150.00

OFFICE HOURS

Monday 9:00 a.m. - 3:30 p.m.
Tuesday - Friday 8:00 a.m. - 3:30 p.m.

OFFICE USE ONLY

Cab/Plate # _____

License # _____

Decal # _____ Color _____

Issue Date _____

Expiration Date _____

DEPARTMENT OF PUBLIC SAFETY
LICENSE SECTIONTHE CITY OF
COLUMBUS
ANDREW J. GINTHER, MAYORDEPARTMENT OF
PUBLIC SAFETY**VEHICLE FOR HIRE
VEHICLE TO VEHICLE
TRANSFER
APPLICATION****TAXI LIVERY****APPLICANT INFORMATION**

Full Name:

Residential Address:

City:

State:

Zip:

Phone:

Email:

Date of Birth:

Race:

Sex:

Height:

Weight:

Hair:

Eyes:

All applicants will be required to provide Proof of Identity.**BUSINESS INFORMATION**

Business Name:

Cab #: (Taxis Only)

Business Address:

City:

State:

Zip:

Business Phone:

Business Email:

NEW VEHICLE INFORMATION

Year:

Make:

Model:

VIN:

License Plate #:

Seating Capacity:

Number of Doors:

DISPATCH SERVICE (TAXIS ONLY)

Dispatch Name:

Dispatch Phone:

Color Scheme:

Lettering Color:

ADDITIONAL INFORMATION

Do you understand that you must have prior APPROVAL by the License Section of any additions to, or changes in design, lettering, and color scheme, as stated above?

Yes No

Has or will this vehicle to be licensed be used for any criminal purposes, including immoral or disorderly conduct, as defined in the City Code Title 23, and Ohio Revised Code Title 29?

Yes No

Will the vehicle to be licensed conform to the City Codes, including, but not limited to the State of Ohio and Federal laws that applicable thereto?

Yes No

Do you understand that you must notify the License Section of any changes including, State of Ohio Vehicle Registration, address and phone number of owner?

Yes No

Do you agree not to interfere with any numbers or plates affixed to your vehicle?

Yes No

Do you agree to conform to and abide by all City of Columbus City Codes, Rules and Regulations pertaining to vehicle for hire including, but not limited to the State of Ohio and Federal laws applicable hereto?

Yes No

Has any license issued to you or your company by the City of Columbus ever been revoked, suspended or refused within the past three (3) years?

Yes No

ALL INFORMATION CONTAINED IN THE APPLICATION IS SUBJECT TO DISCLOSURE AS A MATTER OF PUBLIC RECORD. ANY FALSE STATEMENT MADE OR GIVEN IN THE APPLICATION SHALL RESULT IN THE DENIAL OF THE APPLICATION OR FUTURE REVOCATION OF THIS LICENSE. APPLICANT MAY ALSO BE REFERRED FOR CRIMINAL PROSECUTION.

State of Ohio, County of Franklin

_____, being duly sworn, deposes and says he or she is the
(Print Applicant's Name)

individual making the foregoing application; that he or she is knowledgeable with respect to that which is to be license; and that the answers to the foregoing questions and other statements contained herein are true of his or her own knowledge and belief.

(Applicant's Signature)

Sworn to before me and subscribed in my presence this _____ day of _____, 20_____.

Notary or Agent of Director of Public Safety

Must be SIGNED, DATED, and NOTARIZED.