



**TAXICAB, PEDICAB & PEDAL CAR DRIVER
- RENEWAL -
LICENSE APPLICATION**

THIS APPLICATION IS SUBJECT TO REVIEW BY THE PUBLIC
PLEASE TYPE OR PRINT IN INK

CITY OF SAINT PAUL
Department of Safety & Inspections
375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806
(651) 266-8989 Fax (651) 266-9124
Web: www.stpaul.gov/dsi

Name: L Amont RAY Brown
First Middle (Maiden) Last Title

Home Address: 1068 Western Ave ST. Paul MN 55117
Street (#, Name, Type Direction) City State Zip+4

Mail to Address: _____
(if different than home address) Street (#, Name, Type, Direction) City State Zip+4

Primary Phone: 651-373-3894 Alternative Phone: (_____)

Email Address: MR.LamontBrown@gmail.com Date of Birth: 11-27-1980

Driver's License State/#: 2386297862417 Expiration Date: 11-27-2018

License Type (Circle): **TAXICAB DRIVER (\$43)** **PEDICAB DRIVER (\$43)** **PEDAL CAR DRIVER (\$43)**

Name of company you will be driving for: City Wide

To review all applicable license and operating requirements, the **CITY OF SAINT PAUL LEGISLATIVE CODE** is available online at www.stpaul.gov and www.municode.com. Search Chapter 374 - Commercial pedal car drivers, Chapter 375 - License application (pedicab driver) and/or Chapter 376 - Taxicab driver's license. Contact the Department of Safety and Inspections for more detail.

TAXICAB DRIVER applicants must present a valid State of Minnesota or Wisconsin Driver's License and a current D.O.T. medical card at time of application. Drivers licensed in a state other than Minnesota within ten (10) years preceding application must also provide an official copy of their driving record for the last ten (10) years from each state in which they were licensed.

PEDICAB DRIVER applicants must present a valid State of Minnesota, Wisconsin, Iowa, North Dakota, or South Dakota Driver's License at time of application and drivers licensed in a state other than Minnesota within three (3) years preceding application must also provide an official copy their driving record for the last three (3) years from each state in which they were licensed.

PEDAL CAR DRIVER applicants must present a valid state driver's license at time of application and drivers licensed in a state other than Minnesota within three (3) years preceding application must also provide an official copy their driving record for the last three (3) years from each state in which they were licensed.

TAX IDENTIFICATION NUMBER must be submitted or updated at renewal, per Minnesota Statutes section 270C.72 requiring licensing authorities to collect a tax identification number for each license applicant. The following are acceptable: a **Minnesota Tax Identification Number**, a **Federal Tax Identification Number (FEIN)**, or a **Social Security Number (SSN)**.

FALSIFICATION OF ANSWERS GIVEN OR MATERIAL SUBMITTED WILL RESULT IN DENIAL OF APPLICATION
I hereby state that I have answered all of the preceding questions and that the information contained herein is true and correct to the best of my knowledge and belief. I hereby authorize the Saint Paul Police Department and the Department of Safety and Inspections (DSI) to use the information I have provided to check criminal histories, arrest and driving records, and warrant information; and for the Police Department to provide these records to DSI to determine my eligibility for a Taxicab Driver's, Pedicab Driver, and/or Commercial Pedal Car Driver License. I understand that the information contained in the criminal background investigation is confidential, except that it may be conveyed to other law enforcement or licensing agencies.

[Signature]
Applicant Signature (REQUIRED)

4-3-14
Date