



Contact Business Licensing 263-4553 with any questions or for complete information

_____ Airport Limousine Vehicle (no company license required)
 Fee \$10.00 per year due January 1st.
 _____ Charter Limousine Company (no vehicle license required)
 Fee \$200.00 per year

VEHICLE INFORMATION (attach a sheet if more than one vehicle)

OWNER NAME		PHONE NUMBER	
ADDRESS CITY STATE		ZIP	
YEAR, MAKE AND MODEL		COLOR AND DESIGN	
VIN NUMBER		LICENSE TAG NUMBER	
NUMBER OF PERSON VEHICLE CONSTRUCTED TO CARRY		PROPOSED NUMBER OF PASSENGERS	

BUSINESS INFORMATION

BUSINESS NAME		PHONE NUMBER	
BUSINESS ADDRESS		ZIP	
OWNER NAME		PHONE NUMBER	
OWNER OFFICE ADDRESS		ZIP	
DAYS AND HOURS OF BUSINESS			

CORPORATION (IF APPLICABLE): Please provide the following information for all officers, directors, and each stockholder holding more than 5% of stock in the corporation. If more space is needed, use blank sheets to answer each question.

NAME		HOME PHONE	
RESIDENTIAL ADDRESS		ZIP	

PARTNERSHIP (IF APPLICABLE): Complete the following information for each partner, including all limited partners. If the applicant is a limited partnership, it shall furnish a copy of its certificate of limited partnership. If one of the partners is a corporation, complete the Corporation section above. For more space use a blank sheet to answer each question.

NAME		HOME PHONE	
RESIDENTIAL ADDRESS		ZIP	

I, _____, the applicant, provides this phone number in case of questions _____ and do solemnly swear that I have read the contents of this application and that all information and answers herein contained are complete and true. Furthermore, I hereby agree to comply with all laws of the State of Kansas, and all rules and regulations prescribed by the City of Wichita.

Signature of Applicant

Notary Public

My appointment expires on the _____ day of _____, 20____

If this form is being submitted for only the purpose of adding a vehicle to the taxicab fleet the above does not need to be notarized.

INSURANCE MUST BE SUBMITTED TO WICHITA TRANSIT.

FOR OFFICIAL USE ONLY

	APPROVED	DISAPPROVED	DATE
AIRPORT AUTHORITY			
POLICE			
LAW (insurance approval)			
CITY MANAGER			
CITY COUNCIL			
LICENSE #	DATE	RELEASED	EXPIRATION