



OFFICE OF THE CITY CLERK

Policy, Gaming & Licensing

350 City Hall Square West, Suite 110

Windsor, ON N9A 6S1

Ph: 519- 255-6200, Option 1 Fax: 519-255-6868

www.citywindsor.ca

LIVERY PLATEHOLDER APPLICATION

(2 pages)

FOLDER #:

Vehicle Class:

- REQUIRED:** Safety Certificate Vehicle Ownership Insurance Policy WLC
 Photo of Vehicle Market Study Rate Schedule

LICENCE FEE(S):

Livery Vehicle – Motorized	(\$235.00 each)	No. of Plates:	\$
Livery Vehicle – Muscular	(\$95.00 each)	No. of Plates:	\$
TOTAL FEE			\$

PLEASE PRINT CLEARLY

APPLICANT Personal Information	NAME:			
	ADDRESS:			
	CITY:	POSTAL CODE:	PHONE:	FAX :
	DATE OF BIRTH:			
EMAIL ADDRESS:				
BUSINESS INFORMATION	BUSINESS NAME:			
	BUSINESS ADDRESS:			
	CITY:	POSTAL CODE:	PHONE:	FAX:
CORPORATION (if applicable)	NAME OF CORPORATION:			
PREVIOUS LICENCES	TYPE:			YEAR:

Have you ever been convicted of an indictable offence in Canada or any other criminal offence in any other country?

- YES NO

If so, year: _____ Place: _____

THE DEADLINE TO OBTAIN THE RENEWAL OF A LIVERY VEHICLE LICENCE IS AUGUST 31ST. FAILURE TO OBTAIN A LICENCE RENEWAL BY AUGUST 31ST MAY RESULT IN FURTHER PENALTIES AND/OR FINES. A 50% PENALTY IS ADDED TO THE ABOVE LICENCE FEE ON SEPTEMBER 1ST.

I acknowledge that the information requested on this form and any appendices attached are collected under the authority of the Municipal Act, City of Windsor Act, and City of Windsor Licensing By-law 137-2007 As Amended. This information is required in order to process, issue, monitor, regulate and investigate the various licenses issued by the Office of the City Clerk, Policy, Gaming & Licensing Division. The name and business address of the licensee is public information. Any other personal information collected will only be used for investigative purposes. Questions regarding this collection can be made to the Supervisor of Licensing, 350 City Hall Square West, Suite 110, Windsor, ON N9A 6S1, (519) 255-6200, Option 1.

DATE (MM/DD/YYYY)

SIGNATURE OF APPLICANT



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LIVERY VEHICLE LICENCE APPLICATION (page 2)

VEHICLE INFORMATION:

City Plate	Year of Manufacture	Make/Model Class of Vehicle	Provincial Plate No.	V.I.N.

PARTICULARS OF INSURANCE:

Insurance Liability	\$	Expiry Date	
Insurance Company			
Insurance Agent			

- **By making application, I hereby undertake to notify the Licence Commissioner ten days prior to cancellation of said insurance or any part thereof, or transfer to any other company of such insurance**
- **It is the applicant's responsibility to ensure compliance with any provincial operating licenses required by the Ministry of Transportation.**

DATE (MM/DD/YYYY)

APPLICANT'S SIGNATURE

COMPLIANCE OFFICER INSPECTION COMMENTS:

APPROVED

NOT APPROVED

Compliance Officer Signature: _____