



SAN JOSE POLICE DEPARTMENT
PERMITS UNIT
All Fees are Non-Refundable



TAXI DRIVER APPLICATION

ORIGINAL APPLICATION

RENEWAL APPLICATION

TRANSFER

Last Name _____ First _____ Middle _____
 CA Drivers License _____ Exp. Date: _____
 Address _____ City _____ ST _____ Zip _____
 Home No. _____ Cell phone No. _____
 DOB _____ M F HT _____ WT _____ Hair Color _____ Eye Color _____

Have you ever been convicted of **ANY** crime within the last five (5) years? YES NO

If so, when, where, and for what? _____

I am aware of, and was given a copy of the SJMC Taxi Regulations by: _____
Name of company owner/manager

Intended employer (name of business) _____

Address _____ City _____ Zip _____ Phone # _____

List all employers you have had during the last three years: (Names, Addresses, & Phone #'s):

NAME	ADDRESS	PHONE NUMBER

Have you driven a taxi for another company? YES NO If so, for whom? _____

Has any driver license issued to you by a state or governmental agency ever been revoked? Y N

If you answered yes to the question above, please explain: _____

I CERTIFY UNDER PENALTY OF PERJURY THAT THE STATEMENTS I HAVE MADE ON THIS FORM ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT.

DRIVER'S SIGNATURE: _____

DATE: _____



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TAXI DRIVER COMPLIANCE FORM

Section 6.64 of the San Jose Municipal Code mandates taxicab service regulations, including the following in part:

1. SJMC 6.64.500 (F) - Driver must demonstrate proficient knowledge of traffic laws, the streets of the City of San Jose and the ability to read and understand English.
2. SJMC 6.64.300 - Driver must take passengers to their destination using the most direct, expeditious and safe route.
3. SJMC 6.64.320 (A) - Driver may not charge a greater fare than that authorized by this chapter for the hire of a taxicab.
4. SJMC 6.64.380 - Driver must complete taxicab annual safety inspection with San Jose Police Department
5. SJMC 6.64.550 - In the event of a termination of a taxicab driver's employment or contract, the owner or taxicab driver is required to notify the San Jose Police Department Permits Unit in writing within 24 hours.
6. SJMC 6.64.550 - ID cards are property of the San Jose Police Department and are to be surrendered in the event of termination of employment or contract. If the permit is unavailable, the owner or taxicab driver shall state on the notification of termination the reason.

Any changes in name, address or phone numbers require applicants to notify the San Jose Police Department Permits Unit.

Violations are subject to Administrative or Criminal citations. The responsibility rests with the holders of the Taxi Company license to comply with the above section. The Taxi Company license may be jeopardized by the failure to comply with the above section.

In order to have a method of certifying the above process has been completed, each taxi driver applicant must have a properly filled out copy of this document attached to any application submitted by a taxi driver applicant to the Permits Unit.

I CERTIFY UNDER PENALTY OF PERJURY AND WITH THE UNDERSTANDING THAT I AM COMPLYING WITH SECTION 6.64.460 B6 THAT THE TAXI DRIVER APPLICANT WHOSE NAME APPEARS BELOW HAS BEEN SCREENED BY ME AND HAS THE NECESSARY PROFICIENCY AS REQUIRED BY THE ABOVE SECTION. I ALSO CERTIFY THAT I AM AN AUTHORIZED REPRESENTATIVE OF THE HOLDER OF THE TAXI COMPANY LICENSE.

Name of the taxi driver applicant _____
(Print) (Signature)

Endorsement of taxi company representative _____
(Print) (Signature)

Date of application _____

THIS FORM MUST ACCOMPANY EVERY TAXI DRIVER APPLICATION



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AUTHORIZATION TO RELEASE DRUG & ALCOHOL TEST RESULTS

California Government code Section 53075.5 requires compliance with a mandatory controlled substance and alcohol testing certification program as a condition for issuance of a taxicab driver’s permit. The approval of a taxi driver permit by the Chief of Police of the San Jose Police Department is conditioned upon the Department’s receipt of this authorization to obtain and release the results of all drug and/or alcohol tests and any refusal by me to undergo such testing.

APPLICANTS AUTHORIZATION

I hereby authorize the City of San Jose Department to obtain my drug and/or alcohol test results or any refusal by me to undergo such testing from other law enforcement agencies, previous employers and consortiums.

If I am already employed as a taxi driver and wish to transfer my taxi driver permit from one taxi cab company licensed in San Jose to another, I must complete another drug/alcohol test and receive a negative result. If I fail the drug/alcohol test, my taxi driver permit will not be allowed to transfer.

I hereby authorize the City of San Jose Police Department to release all my test results obtained pursuant to this authorization and any refusal by me to undergo such testing to other law enforcement agencies for the purpose of taxicab licensing/permitting.

Applicant’s Printed Name

Applicant’s Signature

Date

PERMITS OFFICE USE ONLY:

Application Date: _____

CDL No.	Exp. Date:	RMS Acct. No.
Fee: \$	Receipt:	Photo Exp:
Business Lic. No.	Exp. Date:	SLETS
Drug Test Date:	Prints Date:	
Drug Result:		
Drug Authorization:		
Compliance Form:		

REVIEWER'S SIGNATURE: _____ BADGE NO. _____

Date:		Retest Fee	\$	Receipt		Date		Retest Fee:	\$
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TEST	#1 Date	P/F	BADGE	#2 Date	P/F	Badge	#3 Date	P/F	Badge
Written									

POLICE APPROVAL: YES NO

INVESTIGATOR: _____
DATE
NAME
BADGE NO