

**TOWNSHIP OF BLOOMFIELD
APPLICATION FOR
TAXICAB OPERATOR'S LICENSE
2019**

Application Fee: \$50.00
Date Filed: _____

Date of Photograph _____

Applicant's Name: _____ Telephone No.: _____

Home Address: _____ Date of Birth: _____

Place of Birth: _____ Email Address: _____

Citizen of U.S.? Yes _____ No _____ If "No," Naturalization papers **MUST** be attached Yes _____ No _____

Height: _____ Weight: _____ Hair Color _____ Eye Color _____

Social Security Number: _____ Male _____ Female _____ Married _____ Single _____

Driver's License Number: _____ Expiration Date: _____

A. Are you addicted to the use of intoxicating liquors or any drug forming habit? Circle One YES or NO

B. Have you ever been convicted of a crime or of being a disorderly person? Circle One YES or NO.

C. Have you been arrested or summoned to court on ANY charge? Circle One YES or NO.

If "Yes" to any of the above, please provide details: _____

Provide previous home address if at above address less than three (3) years:

Provide name and address of Bloomfield taxi company for whom you plan to work:

Provide previous employers (last five years) together with their address:

State of New Jersey

ss.:

County of _____

_____, being duly sworn, deposes and says that I am the individual making the foregoing Application for a Limousine Operator's License; the answers to the foregoing questions and other statements contained in this Application are true to my knowledge and belief; and that I will report in writing to the Township of Bloomfield any change in my address or current employer that may occur while this License remains in force and effect.

Sworn to and subscribed to before me, this _____ day of _____, 20__.

Notary Public of the State of New Jersey
AFFIX SEAL HERE

Applicant's Signature

DO NOT WRITE BELOW THIS LINE

RECORD BUREAU: A SEARCH BY THE POLICE DEPARTMENT DISCLOSED THE FOLLOWING INFORMATION:

Approved: _____ Director of

TAXICAB OPERATOR'S REQUIREMENTS FOR APPLICATION:

- 2 COPIES OF COMPLETED APPLICATION, SIGNED BY APPLICANT AND NOTARIZED BY A NOTARY PUBLIC OF THE STATE OF NEW JERSEY
- 2 PASSPORT PHOTOGRAPHS TAKEN WITHIN THE PAST THIRTY DAYS
- 2 COPIES OF CERTIFIED DRIVER'S ABSTRACT DATED WITHIN LAST THIRTY DAYS WITH RAISED SEAL FROM DMV ON ORIGINAL
- 2 COPIES OF CURRENT DRIVER'S LICENSE
- SEE ATTACHED INSTRUCTIONS FROM THE BLOOMFIELD POLICE DEPARTMENT REGARDING BACKGROUND CHECK AND FINGERPRINTING INFORMATION
- CHECK OR MONEY ORDER IN THE AMOUNT OF \$50.00 MADE PAYABLE TO THE TOWNSHIP OF BLOOMFIELD

NO APPLICATION WILL BE PROCESSED WITHOUT THE DOCUMENTS NOTED ABOVE.

THANK YOU.

. DIRECTIONS FOR APPLICANT STATE POLICE CHECK- LOCAL ORDINANCE ONLY

CONTACT THE WEBSITE:

<https://www.njportal.com/njsp/criminalrecords/> · CORRECT ORI

NUMBER FOR BLOOMFIELD: NJ0070200 .

CLICK ON THE ON LINE FORM 212A-A HIGHLIGHTED BLOCK LOCATED ON THE LOWER LEFT SIDE OF THE PAGE.

FOLLOW THE PROMPTS FOR THE DEMOGRAPHIC AND PAYMENT INFORMATION

LOCAL ORDINANCE NUMBERS ARE AS FOLLOWS:

. TAXI DRIVER	T.O. 526-6
LIMO DRIVER	T.O. 526-20
CANVASSING	T.O. 408-2
HAWKERS/PEDDLERS	T.O. 408-10

CONTINUE TO COMPLETE THE FORM AS REQUIRED BY THE STATE POLICE AS INSTRUCTED. ONCE THE FORM IS COMPLETED CORRECTLY, CHECK THE AGREEMENT BOX AND YOU WILL THEN HAVE AN OPPORTUNITY TO REVIEW AND MAKE ANY CHANGES BEFORE MOVING ONTO THE PAYMENT SCREEN.

THE FEE FOR THIS POLICE CHECK WILL BE \$20.00.PAYABLE BY CREDIT CARD OR ELECTRONIC CHECK. ONCE YOUR PAYMENT IS VERIFIED, YOU WILL RECEIVE A CONFIRMATION RECEIPT WHICH WILL INCLUDE A CONFIRMATION NUMBER. THE REQUEST WILL THEN BE FORWARDED TO OUR TOWNSHIP ACCOUNT.

PLEASE PROVIDE COPY OF CONFIRMATION WHEN YOU SUBMIT YOUR APPLICATION TO THE RECORD BUREAU.

MORE DETAILED INFORMATION CAN BE OBTAINED BY CLICKING ON THE **HELP TAB** WHICH IS LOCATED ON THE TOP RIGHT SIDE OF TIE PAGE.



State of New Jersey
Office of Forensic Science

Request for a Criminal History Record Information for a Noncriminal Justice Purposes

What is the purpose of this form?

Form 212A is used exclusively for the purpose of local Police Department and State Agencies, to obtain background information for the purposes of employment, licensing and local ordinances.

How do I find out the local licensing authority for my application? Will

■ receive the Criminal History Record Information requested?

What is an ORI Number and why is it important?

Request for a Criminal History Record Information for a Noncriminal Justice Purposes

Service Information

Requests for a Criminal History Record Information (CHRJ), for Non Criminal Justice purposes can be submitted here.

The online 212A Form should be used only after Consultation with your local Police Department or the State Agency that is responsible for the type of licensing needed. You must first obtain an Originating Agency Identifier (OR1) Number from the licensing department to complete this form. Incorrect ORJ Number may result in non- processing of your form.

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Each submission *costs* \$20.00, payable by Visa, Mastercard, Discover, or American Express credit or debit card.

This form can't be used for a personal background check.

10/5/2013

State of New Jersey
Office of Forensic Science

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Request for a Criminal History Record Information for a Non-criminal Justice Purposes

Complete *All* Required Fields [*]

ORI Information:

ORI Number *is* the identifier for the local licensing authority for the jurisdiction of your residential address. Correct ORI Number is essential for processing of this form.

ORI NUMBER *

NJ 0070205