



Village of Round Lake Community Development

442 North Cedar Lake Road Round Lake, IL 60073

847-546-5400 fax 847-546-1872

www.eroundlake.com

TAXI CAB NEW & RENEWAL LICENSES

Applications must be submitted to the Village Clerk or Deputy Clerk at Village Hall. A complete application consists of:

- Completed and signed application.
- Copy of driver's license for each driver.
- Copy of current safety inspection for each vehicle (annual inspections).
- Certificate of insurance for all cabs for the sum of \$50,000 dollars for property damage, \$100,000 for injuries to or death of any one person, and \$300,000 for injuries in any one accident.



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TAXI CAB LICENSE APPLICATION

BUSINESS OWNER INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

EMAIL ADDRESS:

BUSINESS INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

WEBSITE:

BUSINESS EMAIL:

FEIN:

COMMUNICATION

- I WOULD LIKE TO HAVE MY BUSINESS NAME AND CONTACT INFORMATION PUBLISHED ON THE LOCAL BUSINESS DIRECTORY ON THE VILLAGE'S WEBSITE.

TYPE OF BUSINESS ENTITY

- CORPORATION LIMITED LIABILITY COMPANY PARTNERSHIP
 SOLE PROPRIETOR NON-FOR PROFIT OTHER:

FOR SOLE PROPRIETORS

ASSUMED BUSINESS CERTIFICATE FROM LAKE COUNTY ATTACHED YES

FOR PARTNERSHIPS

DATE OF FORMATION:

PARTNERSHIP AGREEMENT ATTACHED YES

APPLICANT INFORMATION PAGE COMPLETED AND ATTACHED FOR EACH PARTNER YES

FOR CORPORATIONS

NAME OF CORPORATION/ LLC:

DATE OF INCORPORATION:

ARTICLES OF INCORPORATIONS DEPICTING THE NAMES OF ALL STOCKHOLDERS,
OFFICERS, DIRECTORS AND THEIR POSITIONS IS ATTACHED.

YES

DESCRIPTION

PLEASE STATE IF ANY CRIMINAL, QUASI-CRIMINAL OR CIVIL COURT ACTIONS ARE PENDING OR BROUGHT AGAINST YOU (APPLICANT) WITHIN THE LAST FIVE YEARS ARISING OUT OF OR RELATED TO APPLICANT'S USE OR OWNERSHIP OF A MOTOR VEHICLE.

PLEASE LIST OUT YOUR CURRENT TAXI LICENSES:

FARE RATE:

CREDIT REFERENCES

#1 NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

#2 NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

#3 NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

PERSONAL REFERENCES

#1 NAME:

ADDRESS:

CITY:

STATE:

PHONE:

#2 NAME:

ADDRESS:

CITY:

STATE:

PHONE:

VEHICLE INFORMATION

VEHICLE #1

MAKE:

MODEL:

YEAR:

COLOR:

PLATE NO:

VIN:

PERMANENTLY ASSIGNED TAXICAB IDENTIFICATION NUMBER?

IS VEHICLE EQUIPPED WITH A SEALED METER IN GOOD CONDITION?

VEHICLE #2

MAKE: MODEL: YEAR: COLOR:

PLATE NO: VIN:

PERMANENTLY ASSIGNED TAXICAB IDENTIFICATION NUMBER:

IS VEHICLE EQUIPPED WITH A SEALED METER IN GOOD CONDITION?

VEHICLE #3

MAKE: MODEL: YEAR: COLOR:

PLATE NO: VIN:

PERMANENTLY ASSIGNED TAXICAB IDENTIFICATION NUMBER:

IS VEHICLE EQUIPPED WITH A SEALED METER IN GOOD CONDITION?

**PLEASE USE ADDITONAL PAGE FOR VEHICLE DESRIPTION IF NEEDED.

I HEREBY MAKE APPLICATION FOR A VILLAGE OF ROUND LAKE TAXI CAB OPERATOR'S LICENSE AND AFFIRM THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND ACCURATE. I GIVE PERMISSION TO THE ROUND LAKE POLICE DEPARTMENT TO VERIFY ANY AND ALL INFORMATION I HAVE PROVIDED BY CONDUCTING A BACKGROUND INVESTIGATION. I REALIZE THAT IF I HAVE PROVIDED INACCURATE INFORMATION, I MAY BE DENIED A LICENSE. I FURTHER AGREE TO INFORM THE VILLAGE OF ROUND LAKE, IN WRITING, WITHIN 10 DAYS, IF ANY OF THE INFORMATION I HAVE PROVIDED ABOVE CHANGES. I UNDERSTAND THAT THIS LICENSE MAY BE REVOKED AT ANY TIME, FOR DUE CAUSES, AT THE DISCRETION OF THE VILLAGE ADMINISTRATOR OR HIS/HER DESIGNEE. I FURTHER CERTIFY THAT I UNDERSTAND ALL OF THE PROVISIONS OF THE VILLAGE OF ROUND LAKE ORDINANCE CHAPTER 5.52 PERTAINING TO TAXICABS AND AGREE TO ABIDE BY SAID ORDINANCE.

SIGNATURE OF APPLICANT

DATE

FEE SUMMARY		APPROVALS
ANNUAL BUSINESS LICENSE:	\$ _____	_____ COMPLETED APPLICATION
REGISTRATION:	\$ _____	
TOTAL LICENSE FEE:	\$ _____	



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TAXI CAB DRIVER/OPERATOR'S REGISTRATION

DRIVER INFORMATION

NAME (FIRST, MIDDLE, LAST):

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

CELL:

EMAIL ADDRESS:

HAVE YOU EVER BEEN DENIED AN OPERATOR'S LICENSE? YES NO

IF YOU ANSWERED YES, IN WHAT MUNICIPALITY AND WHY?

PLEASE ACKNOWLEDGE BY INITIALIZING EACH ITEM BELOW.

NO REGISTERED OPERATOR SHALL BE ON DUTY AS A DRIVER OR OPERATOR FOR MORE THAN SIXTEEN (16) HOURS OF ANY TWENTY-FOUR (24) CONSECUTIVE HOURS AND NO LICENSEE SHALL PERMIT ANY REGISTERED OPERATOR TO BE ON DUTY FOR MORE THAN SIXTEEN (16) HOURS OUT OF EVERY TWENTY-FOUR (24) CONSECUTIVE HOURS. **INITIAL:**

NO REGISTERED OPERATOR, WHILE ON DUTY, SHALL DRINK ANY INTOXICATING LIQUOR OR USE ANY PROFANE OR OBSCENE LANGUAGE, OR SHOUT OR CALL TO PROSPECTIVE PASSENGERS OR TO DISTURB THE PEACE IN ANY WAY. **INITIAL:**

EVERY REGISTERED OPERATOR SHALL OBEY ALL TRAFFIC RULES AND REGULATIONS ESTABLISHED BY ILLINOIS LAW OR VILLAGE ORDINANCES WHILE DRIVING OR OPERATING A TAXICAB WITHIN THE VILLAGE. **INITIAL:**

I HEREBY MAKE APPLICATION FOR A VILLAGE OF ROUND LAKE TAXI OPERATOR'S REGISTERED DRIVER AND AFFIRM THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND ACCURATE. I GIVE PERMISSION TO THE ROUND LAKE POLICE DEPARTMENT TO VERIFY ANY AND ALL INFORMATION I HAVE PROVIDED BY CONDUCTING A BACKGROUND INVESTIGATION. I REALIZE THAT IF I HAVE PROVIDED INACCURATE INFORMATION, I MAY BE DENIED A LICENSE. I FURTHER AGREE TO INFORM THE VILLAGE OF ROUND LAKE, IN WRITING, WITHIN 10 DAYS, IF ANY OF THE INFORMATION I HAVE PROVIDED ABOVE CHANGES. I UNDERSTAND THAT THIS LICENSE MAY BE REVOKED AT ANY TIME, FOR DUE CAUSES, AT THE DISCRETION OF THE VILLAGE ADMINISTRATOR OR HIS/HER DESIGNEE. I FURTHER CERTIFY THAT I UNDERSTAND ALL OF THE PROVISIONS OF THE VILLAGE OF ROUND LAKE ORDINANCE CHAPTER 5.52 PERTAINING TO TAXICABS AND AGREE TO ABIDE BY SAID ORDINANCE.

APPLICANT SIGNATURE

DRIVER SIGNATURE

PLEASE SUBMIT A COPY FOR EACH DRIVER AND OF THE DRIVER'S LICENSE FOR EACH DRIVER