



City of Hoonah  
P.O. Box 360 Hoonah, AK 99829 (907) 945-3663 Fax (907) 945-3445

## Driver- For-Hire Permit Application

- REQUIRED: COPY OF DRIVER'S LICENSE (BOTH SIDES)
- APPLICATION FEE: **\$20.00**
- STATE OF ALASKA DMV REQUEST FOR DRIVING RECORD FEE: \$10.00 Applicant pays this directly to the SOA DMV (once filed, DPS will receive Driving Record Verification)

Name of Applicant \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Number of years' experience in transportation of passengers: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Alaska Driver's License Number \_\_\_\_\_ Date of expiration: \_\_\_\_\_

Name and address of Insurance Company \_\_\_\_\_

Policy Number: \_\_\_\_\_

Have ever been convicted of a felony. NO [ ] YES [ ]

Have you ever had your driver's license in this or any other jurisdiction revoked, suspended or canceled? NO [ ] YES [ ] IF so, in what state: \_\_\_\_\_

Do you have any mental or physical conditions that would adversely affect your ability to operate a motor vehicle in a safe manner? NO [ ] YES [ ]

Number of vehicles to be operated or controlled. \_\_\_\_\_

Color scheme or insignia of vehicle(s) to be used. \_\_\_\_\_

Location of proposed taxi stands. \_\_\_\_\_

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I, \_\_\_\_\_ do hereby swear or affirm under penalty of law, that I meet the qualifications necessary to obtain a For-Hire Driver's Permit as specified by Hoonah Municipal Code. I further authorize release of all information pertaining to me from records of credit bureaus, educational, institution, military services, law enforcement agencies. I also authorize the Hoonah Police Department to release to any law enforcement agency, information which the department learns regarding me because of this Application process. I further agree and consent in advance to having my For-Hire Driver's Permit suspended without cause or hearing if any of the information that I have provided on this or any other form for application contains any misrepresentation or falsification or any requested Information has been knowingly omitted.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

City of Hoonah Office Use Only:

1. Copy of Driver's License (both sides) \_\_\_\_ YES \_\_\_\_ NO
2. Driving Record received from State of Alaska DMV \_\_\_\_ YES \_\_\_\_ NO
3. Fees paid for application: \_\_\_\_ Cash \_\_\_\_ Check \_\_\_\_ Credit Card

\_\_\_\_ Staff Initial