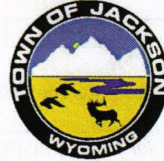


Date: _____

License #: _____

- New Application
- Updated Information



Town of Jackson
Ground Transportation Application
 PO Box 1687, Jackson, Wyoming 83001
 Phone: (307)733-3932
 Fax: (307)739-0919
www.jacksonwy.gov

Instructions: **All information on both sides of this form must be fully completed.** Failure to complete any item will delay the processing of your application. All payments shall be made at the time of application and shall be non-refundable, unless an application is denied. If the Town denies a business license application, the entire fee, less a \$37.00 application fee, will be refunded. An application for a business license **must be submitted and approved** by the Town **before the business can begin operations.**

<u>Ground Transportation</u> 1 - 10 employees = \$100.00 11+ employees = \$200.00

Business Name: _____

D/b/a: _____

Nature of Business: _____

Is the Business in your residence? Yes No

Is the Business a: Corporation Partnership Sole Proprietorship LLC

Business Physical Address: Street & No: _____

Bldg/Apt: _____ City: _____ State: _____ Zip Code _____

*** Any change of location or ownership requires a new application, a \$37.00 fee, and subject to approval by the Town of Jackson**.*

Business Mailing Address:

Post Office Box: _____ City: _____ State: _____ Zip Code: _____

Business Phone Number : (____) _____

Fax /email address: _____

WY Sales Tax Number: _____

Federal Employers ID Number or SSN: _____

*Owners/Officers/Partners **REQUIRED** *(license will be DENIED if information incomplete)*

(Please provide copy of Driver's License)

REQUIREMENTS FOR GROUND TRANSPORTATION

Proposed method of Operation (Circle One) Courtesy Vehicle, Limousine, Taxi or Other

Copy of Valid and Current Photo Identification Y or N

Copy of Wyoming Sales Tax Certificate Y or N

Department of Revenue Letter of Good Standing Y or N

Copy of Certificate of Workers Compensation or Certificate of Exemption Y or N

Whether a Town of Jackson Business license has ever been Revoked Y or N

Copy of Insurance policy – Applicant shall list Town as a “Certificate Holder” on policy.

(\$500,000 Property Damage and \$500,000 Personal Injuries) and Proof of the

“Form E” filing with WYDOT

WYDOT Operating Authority filing with WYDOT

Have you ever been convicted of a felony? Yes No