



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

Date: _____
 License #: _____
 New Application
 Updated Application

Both sides of this form must be completed in full. Failure to do so will delay the processing of your application. All payments shall be made at the time of application and shall be non-refundable unless the application is denied. If the Town denies a ground transportation license application, a refund will be issued, less a \$44.00 non-refundable application fee. Applications for a ground transportation license **must be submitted and approved** by the Town **before the business can begin operations.**

**** Any change of location or ownership requires a new application, a \$44.00 fee, and subject to approval by the Town of Jackson**.**

Ground Transportation
 1 - 10 employees = \$118.00
 11+ employees = \$237.00

Business Name: _____

D/b/a: _____

Nature of Business: _____

Is the Business in your residence? ____ Yes ____ No **If YES, submit Home Occupation Form**

Business Physical Address: Street & No: _____

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

Business Mailing Address:

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

Business Phone Number : (____) _____

Fax: _____

Email address: _____

Where is the parking provided for your business? _____

How many spaces are allocated to the business? _____

***** The above questions MUST be completed for your application to be processed. *****

REQUIREMENTS FOR GROUND TRANSPORTATION

Copy of Valid and Current Photo Identification

Copy of Insurance policy – Applicant shall list Town as a “Certificate Holder” on policy. (\$500,000 Property Damage and \$500,000 Personal Injuries)

I, _____, do hereby swear and affirm the information I have supplied in this application is true and correct to the best of my knowledge. Further, I do hereby consent to the release of all medical, physical, criminal and any other information, including information of a confidential or privileged nature by any person(s) having such records for the purpose of checking my suitability to obtain the permit requested herein. I hereby release said persons, their organizations, and others from any liabilities or damage which may result from furnishing the requested information. A photocopy of this release is considered as valid as an original.

STATE OF WYOMING)
) §
 COUNTY OF TETON)

 signature of applicant

SUSCRIBED AND SWORN TO BEFORE ME BY

 Printed name of applicant

This _____ day of _____ 20____

WITNESS my hand and official seal

 Notary Public

5.50.040 Ground transportation business license – Fee; Insurance A. Fee required. The annual fee for engaging in a ground transportation business shall be in an amount established by resolution. Whenever the number of employees shall be increased during the license year, the licensee shall notify the Town of such change and shall pay the additional fee. If a license is suspended or revoked as set forth herein, such fee is non-refundable. (Ord. 1280 §3, 2021; Ord. 995 §1, 2011; Ord. 922 §1, 2009.) B. Insurance. Prior to initial issuance or any renewal of a ground transportation business license, the applicant shall submit to the Town Manager, or their designee, a current policy of insurance that indicates that the vehicle(s) to be utilized is approved by the insurance company to be operated as a “taxi” or an “executive services vehicle/limousine” in such amounts as the Town Council shall from time to time determine appropriate, executed by an insurance company qualified to do business in the state, and approved by the Town Council, insuring any person against loss or damage to person or property resulting to said person or said person’s beneficiaries from the negligent operation of any ground transportation vehicle operated by or on behalf of the owner thereof. The applicant shall also list the Town as a “certificate holder” on the policy of insurance and provide proof thereof. (Ord. _____ § ____, _____; Ord. 1100 §1, 2015, Ord. 961 §1, 2010; Ord. 922 §1, 2009).

For Official Use Only – Please Do Not Write Below This Line

Business is: Home Occupation Home Business Other

Zoning: UC UC2 UR AR AC SR R
 BC NC NC2 OP RB BP MHP

Business Physical Location: Within the Town Limits In Teton County Out of Teton County

Approving Department	Initials	Date Approved	Comments
Building Department			
Fire Department			
Planning Department			
License Fee	\$		
Date Paid			