

**El Paso Police Department
APPLICATION FOR AIRPORT OPERATING PERMIT**

Part I

1. Type Request	2. Type Vehicle For Hire Permit Requested	3. Permit No.	4. Application Date
Original			
Renewal			
5. Name of Owner or Corporation	6. Doing Business As: (D.B.A.)		7. Date DBA filed
8. Business Address (local)		9. Zip Code	10. Business Phone
11. Form Of Business:	Individual: Partnership	Corporation:	Other:
12. If Corporation:	Name of Principle Officer	Address (City)	(State & Zip Code)

Part II Supporting Documents

Need Filed Enclosed

1. If Corporation, attach a copy of the agreement of Article of Incorporation
2. Insurance: Attach a copy of current (policy)(certificate) of insurance insuring up to \$100,000 for bodily injury to one person per accident;\$300,000 bodily injury to two or more persons per accident; and \$50,000 for property damage.
insurance for operating permit at the El Paso International Airport. (E.P.I.A.)
Self Insurance: Attach a copy of certificate of self-insurance.
3. Attach a list of all vehicles with a copy of the vehicle registration for each vehicle applicant proposes to use as a vehicle for hire.
4. Attach a list of drivers with city chauffeur's license or such person proposed to operate such vehicle for hire upon approval.
5. Attach copy of current tax certificate for each vehicle from the Central Appraisal District at 5801 Trowbridge Mon.-Fri. 8-5 telephone 780-2000

PART III CERTIFICATE

I do hereby certify that the information on this application is true and that all documents are attached as reflected above.

Signature Of Applicant

Subscribed before me, a notary public for the State of Texas, on this the _____ day _____ 20____

Signature of Notary Public

My Commission Expires:

**El Paso Police Department
INSTRUCTIONS
APPLICATION FOR OPERATING PERMIT**

PART I

1. TYPE REQUEST: Applicant is to indicate whether this application is an original permit request or renewal of an existing permit.

2. TYPE VEHICLE FOR HIRE PERMIT REQUESTED: The applicant will select the appropriate heading from the list of vehicle for hire services as follows and will type or print in the space provided:

TAXICAB PERMIT

LIMOUSINE SERVICE

SIGHTSEEING & CHARTER SERVICE

MEXICO TOUR CAR SERVICE

DRIVERLESS AUTOMOBILE SERVICE

3. PERMIT NUMBER: The applicant will leave this column blank, as it will be filled in by the Police Department.

4. APPLICATION DATE: The applicant will leave this column blank as it will be filled in by the Police Department.

5. NAME OF OWNER OR CORPORATION: The name of the individual owner or senior officer of partnership will be typed or printed in this column. If corporation, the name of corporation will be recorded in this column.

6. DOING BUSINESS AS (D.B.A.): The applicant will type or print the company name as reflected on the D.B.A. certificate.

7. DATE D.B.A. FILED: The applicant will type or print the company name as reflected on the D.B.A. Certificate.

8. BUSINESS ADDRESS: This will be the physical location of the business.

9. ZIP CODE: This will be the zip code to the business.

10. BUSINESS PHONE: This will be the business phone number located at the business address or at a location where the owner may be reached.

11. FORM OF BUSINESS: The applicant will indicate the form of business by placing an "X" to the right of the appropriate response.

12. IF CORPORATION: Record the name, address, city, state and zip code of the principal officer of the corporation.

PART II

NEEDED: The applicant shall attach to the application the document called for when there is an " " marked in that slot.

FILED: If there is a current copy of a document on file with this department an " " will be entered on the application by a member of this office.

ENCLOSED: the applicant will write either a "YES" or "NO" response indicating that the document is enclosed, or is not enclosed when form indicates document is needed.

PART III

The applicant will sign the application in the presence of a Notary Public who will notarize the document. If you have any questions please call the Vehicle for Hire office at (915) 564-7056.

**EL PASO POLICE DEPARTMENT
FEE VOUCHER**



FROM: El Paso Police Department
VEHICLE FOR HIRE SECTION
911 N. Raynor
El Paso, Texas 79903

TO: CITY CASHIER
Attn: CITY CASHIER
811 Texas Ave.
El Paso, Texas 79901

The person presenting this document is seeking to deposit the below listed fee payable to the CITY OF EL PASO, pursuant to Title 6 of the City Code. **PLEASE DEPOSIT SUCH FEE INTO DEPT. I.D. #321, Division #21170; FUND #1000.**

Name of Payee: _____ Company: _____

- 441350 1 \$10.00 DUP CHAUFFEUR LICENSE/CHANGE OF COMPANY
- 441350 2 \$15.00 CHAUFFEUR LICENSE APPLICATION
- 450650 3 \$10.00 FARE CARD
- 441280 4 \$23.00 ISSUE/REPLACE TAXICAB PERMIT
- 441470 5 \$23.00 APPLICATION FOR LIMOUSINE PERMIT
- 441280 6 \$38.00 INTERNATIONAL TAXICAB
- 441470 7 \$16.50 APPLICATION FOR PEDICAB PERMIT
- 441470 8 \$38.00 APPLICATION FOR SIGHTSEEING & CHARTER

Please use the following fee at the annual rate chargeable:

- **\$2.84 MONTHLY CHARGE 1. \$38.00 per vehicle wi 1-10 seats. _____ # of vehicles
- **\$5.69 MONTHLY CHARGE 2. \$75.00 per vehicle with 11-20 seats. _____ # of vehicles
- **\$11.39 MONTHLY CHARGE 3. \$150.00 Per vehicle with 21 OR MORE SEATS. _____ # of vehicles

**Fee will be pro-rated based upon whole months less than twelve (12) months from October 31st permit expiration.

Total Fee \$ _____

- 450210 9 \$110.00 PEDICAB ANNUAL FEE (**9.17 MONTHLY CHARGE)
- 441480 10 \$150.00 RENT-A-CAR ANNUAL FEE

- 441470 11 \$150.00 per Limousine vehicle (**\$12.50 MONTHLY CHARGE) Number of Vehicles: _____

**Fee may be pro-rated based upon whole months less than twelve months from September 30th permit expiration.

An additional inspection fee of \$13.67 must be paid for each vehicle.

Total Fee \$ _____

- 441280 12 \$165.00 EXPANSION OF FLEET PERMIT more than 6 months prior to August 31 st.
Authorized Taxicabs _____ **Total Fee \$ _____**
- 441280 13 \$165.00 YEARLY AUTHORIZED TAXICAB PERMIT (PERMITS TRANSFERABLE)
Annual fee payable prior to cashiers closing on August 31st of each year.
\$110.00 PERMITS TRANSFERABLE :
\$100.00 Pro-rated up to 6 months prior to expiration. **\$
Authorized Taxicabs _____ **Total Fee \$ _____**
- 441280 14 \$250.00 YEARLY AUTHORIZED TAXICAB ZONE PERMIT
Annual fee payable prior to cashiers closing on August 31st of each year.

PLEASE DEPOSIT BELOW FEES IN Reimbursement Expenditure #405067, Dept# 321, Division #21170, FUND #1000

- 405067 15 \$210.00 Each day or fraction of a day for hearing court reporter fleet expansion ONLY



Total Fee \$ _____

PLEASE DEPOSIT BELOW FEES IN DEPT. I.D. # 562, Division # 62070, FUND # 3000.

- 430220 16 \$250.00 AIRPORT STICKER annual fee payable prior to closing on December 31st of each year.

Authorized Taxicabs _____ **Total Fee \$ _____**

PLEASE DEPOSIT BELOW FEES IN DEPT. I.D. # 231, Division # 37060, FUND # 3600.

- 442040 17 \$31.00 Taxicab Vehicle Inspection (at the Police Garage)
- 442040 18 \$28.00 Other Vehicle Inspections (at the Police Garage)

Vehicle #: _____

