



"...meeting community needs  
.....enhancing the quality of life"

# LICENSE APPLICATION for TAXICAB/LIMOUSINE DRIVER'S LICENSE

<b>FEES ARE NON-REFUNDABLE</b>		Date Recv'd <u>6/14/18</u>
License fee	\$50.00	Acct. 11030.4321
Investigation fee	\$ 7.00	Acct. 100.2359
Total fee paid	\$ <u>57.</u>	Receipt <u>4857795</u>

Original Application  
 Renewal - License # \_\_\_\_\_

all  
then  
ready

## SECTION 1 - APPLICANT INFORMATION

WALTER C. SPARKS

Applicant Name (Last, First, MI) <u>Walter C. Sparks</u>		Maiden	
Street Address		City	State Zip
Driver's License Number	State License issued In <u>WI</u>	Are you a Citizen of the United States? <input checked="" type="radio"/> YES <input type="radio"/> NO	
Date of Birth	Sex <u>M</u>	Home Phone Number	Cell phone Number
Previous address - if less than 2 years at present address:		City	State Zip
Company Employed by <u>YELLOW CAB</u>		Date hired <u>6-12-18</u>	Number of years you held a D/L <u>50</u>

## SECTION 2 - CONVICTION RECORD

Has your license EVER been revoked or suspended?	YES	<input checked="" type="radio"/> NO	If Yes, when and for what reason?
Is your present driver's license a restricted occupational license?	YES	<input checked="" type="radio"/> NO	If Yes, please explain:
Within the last 5 years have you been convicted of operating a motor vehicle while intoxicated?	YES	<input checked="" type="radio"/> NO	If Yes, please explain:
Have you been convicted of more than three moving violations in the past year?	YES	<input checked="" type="radio"/> NO	If Yes, please explain:
Have you had more than three traffic accidents in the past year regardless of fault?	YES	<input checked="" type="radio"/> NO	If Yes, please explain:
Have you held a driver's license in another state in the past 5 years?	YES	<input checked="" type="radio"/> NO	If Yes, please explain:
Have you EVER been convicted of a felony or misdemeanor?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	If Yes, please explain in detail: <u>3rd degree felony sexual assault on intoxicated woman - 2012</u>

## SECTION 3 - PENALTY NOTICE

Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.  
 Applicant's Signature: \_\_\_\_\_

## FOR OFFICE USE ONLY

Date sent to APD:	Approve	Deny	By <u>Miller</u>	Reason
Return application to: City Clerk, 100 North Appleton Street, Appleton, WI 54911	Date issued	Exp. date	License Number	