

**APPLICATION FOR LICENSE**  
CITY OF YANKTON, COUNTY OF YANKTON,  
STATE OF SOUTH DAKOTA

To the Honorable Mayor and Board of City Commissioners:

Application for license to engage in the business of **Vehicles for Hire** located at Yankton, South Dakota, for the period of one year from

January 1, \_\_\_\_\_ to December 31, \_\_\_\_\_

NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_

**FEE: PASSENGER TRANSPORT: \$25.00/yr. for 1<sup>st</sup> vehicle plus \$10.00/yr. for 2<sup>nd</sup> vehicle and \$5.00/yr. each additional vehicle.**

Number of Vehicles used to Transport Passengers: \_\_\_\_\_

TOTAL FEE: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Amount of Liability Insurance: \_\_\_\_\_

Insured By: \_\_\_\_\_

Policy Expiration Date: \_\_\_\_\_

List of Drivers: (Photocopy of SD Driver's Licenses must be provided for all drivers.)

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

**In addition, the following information must accompany the license application:**

1. A photograph and a description, including the color, year, make, model and vehicle identification number of each motor vehicle used in the taxicab business.

2. The physical address where each motor vehicle is stored and maintained:

\_\_\_\_\_

3. A statement under oath from an ASE A Series certified auto mechanic affirming that he or she has thoroughly inspected each motor vehicle identified in the application within thirty (30) days of the date the application is submitted to the City of Yankton, and that as of the date of inspection each is in a road worthy mechanical condition and free of any reasonably ascertainable mechanical defect that would endanger the safe operation of the vehicle for use in a taxicab business. **(Attach signed and notarized "Vehicle For Inspection Report" form and copy of inspecting mechanic's "ASE A Series Certification.")**

Statement under oath as to whether the applicant and each of the applicant's owners, operators, agents or employees has ever caused personal injury or property damage arising from the use or operation of a motor vehicle: (Attach additional pages as needed.)

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Statement under oath as to whether the applicant or each of the applicant's owners, operators, agents or employees has been convicted of any state or municipal driving or vehicle-related petty offense or class 2 misdemeanor violations within the last three (3) years, or convicted of any class 1 misdemeanor, felony or non-driving municipal ordinance within the last ten (10) years, the nature of the offense(s) and the punishment or penalty assessed therefor: (Attach additional pages as needed.)

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Date: \_\_\_\_\_ By: \_\_\_\_\_  
(Printed Name)  
Title: \_\_\_\_\_

I hereby swear under oath that the above information is true and correct to the best of my knowledge.

Applicant's Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_ County,  
State of South Dakota.

My Commission Expires \_\_\_\_\_  
(Notary Public)

Please refer to the attached Municipal Code—Chapter 13. Licenses and Business Regulations, Article III, Division 1. Vehicles for Hire, Sections 13-36 through 13-44. To see the City's Municipal code online go to [cityofyankton.org](http://cityofyankton.org) and select "Get Public Documents--Online Code of Ordinances."

Instructions: File this application form along with the appropriate attachments, license fee, and proof of liability insurance to the City Finance Officer, PO Box 176, Yankton, SD 57078. Questions? Contact: 605-668-5243.

For Finance Office Use Only:

Applicant is hereby approved: \_\_\_\_\_

Fee Paid \$ \_\_\_\_\_ Receipt No. \_\_\_\_\_ License No. \_\_\_\_\_