



# State of New York County of Broome Government Offices

Broome County Government Security Division

Jason T. Garnar, County Executive · Brian R. Norris, Director

## APPLICATION FOR REPLACEMENT OF TAXICAB DRIVER'S LICENSE

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Date of Birth (mm/dd/yy): \_\_\_\_\_ NYS Drivers' License # \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Name of Company from which you operate any taxicab: \_\_\_\_\_

Broome County Taxi License Number: \_\_\_\_\_

Expiration Date (mm/dd/yy): \_\_\_\_\_

Reason for replacement:  Lost  Destroyed  Stolen

Copy of Police report attached, if stolen

Explain: \_\_\_\_\_

\_\_\_\_\_

Since date of original taxi application, have you been arrested or convicted of a felony, misdemeanor, or any offenses involving illegal drugs, alcohol, domestic violence, or a sexually related offense, or have any pending charges for any offense?

Yes  No If yes, explain:

\_\_\_\_\_

\_\_\_\_\_

**"PURSUANT TO THE NEW YORK STATE PENAL LAW SEC. 210.45, IT IS A CRIME PUNISHABLE AS A CLASS A MISDEMEANOR TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN"**

Applicant Signature: \_\_\_\_\_

Date: (mm/dd/yy) \_\_\_\_\_

\_\_\_\_\_, being duly sworn, deposes and says that he/she is the individual making the foregoing application for a taxicab driver's license; and that the answers to the foregoing questions and other statements contained therein are true of his/her own knowledge and belief.

Subscribed to and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20

\_\_\_\_\_  
Notary public or Clerk of Broome County

**FOR OFFICE USE ONLY**

Copy of NY State Drivers' License

Fee collected (\$ 25.00)  Cash  Check  Credit Card

Processed by \_\_\_\_\_ Date (mm/dd/yy): \_\_\_\_\_

**ATTACH ALL SUPPORTING DOCUMENTATION**

Approved  Denied Reason: \_\_\_\_\_

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Director of Security Date (mm/dd/yy): \_\_\_\_\_