

**FOR-HIRE OPERATOR
APPLICATION**



Taxes & Licenses
808 W. Spokane Falls Blvd
Spokane, WA 99201-3336
(509)625-6070

Date: _____

Applicant Information:

Company Name: _____

Contact Person: _____

Physical Address: _____

Mailing Address: _____

Email Address: _____

Web Page: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

If TNC, number of affiliated vehicles: _____

Fees:

Taxi's-----\$500

TNC's:

Number of affiliated vehicles:

1-10 -----\$500

11-25-----\$750

25-50-----\$1,000

51 + -----\$2,000

Payment amount: \$ _____

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. And the applicant agrees to comply with the provisions of the Spokane Municipal Code 10.34A and all the laws and regulations thereto.

Signature: _____ Date: _____

Print Name: _____

To be completed by Taxes & Licenses staff:

License #: _____ Date: _____

Licensing Officer: _____