



**Town of Brookhaven  
Department of Public Safety**

One Independence Hill  
Farmingville, New York  
Phone (631) 451-6291 Fax (631) 451-6908



**APPLICATION FOR TAXICAB & LIVERY BUSINESS LICENSE AND MEDALLION**

**NON-REFUNDABLE FEE: \$ 200.00 FOR BUSINESS + \$125.00 PER VEHICLE**

**DATE:**

**APPLICANT INFORMATION:**

Name:				
Home Address:				
City, State, Zip:				
Phone:		E-Mail:		
Date of Birth:	Height:	Weight:	Eye Color:	Hair Color:
Place of Birth:			Are you a United States Citizen? YES NO	
IF naturalized, date and place of naturalization:				
IF you are NOT A U.S. citizen, proof of legal entry into the United States must be submitted.				
Driver's License #:		State Issued:	Class:	Expiration Date:
Have you ever been convicted of misdemeanor or felony in the last five (5) years?				YES NO
If YES, Date of Conviction:		Original Charge(s):		
Charge(s) Convicted of:			Court:	
Docket, Index, Indictment or File Number:				

**BUSINESS INFORMATION:**

Business Name:				
Business Address:				
City,State,Zip:				
Physical Address (if above address is a PO Box):				
City,State,Zip:			E-Mail:	
Day Phone:			Night/Weekend Phone:	
Business is a (circle one): Corporation Partnership LLC Association Individual D/B/A				
New York State Sales Tax ID #:			Federal Employer ID #:	
<b>Note:</b> Copies of all filed business certificates must be submitted with this application.				
<b>Note:</b> Certificates of insurance for the business listed must be submitted with this application.				
List all partners, association members, corporate officers, directors and/or shareholders owning more than 5% of outstanding stock:				

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**FROM PROPERTY TAX MAP:**

DISTRICT:	SECTION:	BLOCK:	LOT:
STREET #	N S E W OF		
DISTANCE (FEET):	N S E W OF		
NEAREST CROSS STREET:		TOWN TAX ITEM #	
DOES PREMISES HAVE CO, CEU, CZC, OR ZBA OUTDOOR STORAGE PERMIT?    YES    NO			
TYPE:	NUMBER:	DATE ISSUED:	

**Note:** If applicant is not the owner of the property, a copy of a current written and signed lease from the property owner must be submitted with this application.

**OTHER LICENSES HELD: (Includes licenses in any occupation)**

Type of License:	License #:
Where was license issued:	Dates Held:
Was License ever suspended or revoked?    YES    NO	If Yes, Date and Reason:

**VEHICLE INFORMATION: (\$125.00 per vehicle)**

**Copies of the current, valid title, New York State Registration, New York State Inspection Certificate and Certificate of Insurance for each listed vehicle must be submitted with this application.**

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

License Plate:		VIN #:	
Year:	Make:	Model:	Color:
Fleet # of vehicle (If application):		Medallion #:	
Name, Address and Telephone Number of Vehicle Owner: (if different than Business Owner)			

By Initialing below, the undersigned agrees that he/she is responsible for ensuring that all vehicles possessing medallions are outfitted with such equipment as may be prescribed by the State of New York, County of Suffolk and Town of Brookhaven.

**Initial:**

By Initialing below, the undersigned agrees that he/she and his/her agents will take all training courses as may be prescribed by the State of New York, County of Suffolk and Town of Brookhaven designed to educate and familiarize them with customary safety standards and shall provide evidence of the satisfactory completion of such courses.

**Initial:**

I, THE UNDERSIGNED, AFFIRM UNDER PENALTIES OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE, AND THAT THE VEHICLE(S) IS/ARE EQUIPPED AS REQUIRED BY LAW. I FURTHER AFFIRM THAT THIS APPLICATION IS ACCEPTED ON THE CONDITION THAT THE PROVISIONS AND REGULATIONS OF THE TOWN OF BROOKHAVEN CODES AND THE REQUIREMENTS OF THE RESPECTIVE TOWN DEPARTMENTS SHALL BE COMPLIED WITH. IT IS UNDERSTOOD THAT ANY VIOLATION OF THE CODES OF THE TOWN OF BROOKHAVEN MAY RESULT IN THE IMMEDIATE REVOCATION OF THIS APPLICATION AND ITS ATTACHED LICENSES.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Clearly Print or Type Name of Applicant**

Sworn to me before this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
**Notary Public**

## **CHECKLIST FOR TAXI & LIVERY APPLICATIONS**

### **Business Owner's License:**

- **\$200.00 Application Fee (Check or Money Order payable to Town of Brookhaven)**
- **\$50.00 Late Fee only if renewal application is not submitted by January 31st**
- **Copy of current lease stating use of property as a taxi or livery business (if not the property owner)**
- **Copy of all business certificates filed with the County, State, etc. (includes Corps, LLC's and DBA's)**
- **Copy of Current Certificate of Insurance for the business**
- **Copy of business owner's New York State Driver's License**
- **Schedule of Fares to be charged**

### **Taxi & Livery Medallion:**

- **\$125.00 Application Fee per Vehicle (Check or Money Order payable to Town of Brookhaven)**
- **\$15 Late Fee per vehicle if renewal application is not submitted by January 31st**
- **Copy of New York State Registration for each vehicle listed on the application**
- **Copy of New York State Inspection Certificate for each vehicle listed on the application**
- **Copy of current title for each vehicle listed on the application**
- **Copy of current Certificate of Insurance for each vehicle listed on the application**