



Check List for NEW Applicants
Taxicab Two-Way Dispatch Service License Application

The license term for Taxicab Two-Way Dispatch Service License is December 1st to November 30th. Refer to Municipal Code of Chicago (MCC) Chapter 9-112 "Taxicabs", specifically MCC 9-112-550, for more information on this license. The MCC is available at www.amlegal.com.

License applicants must submit completed, signed, and notarized license applications along with required documents to BACPPV@cityofchicago.org. A license application will be reviewed once all documents have been received. Only applications submitted by applicants that have paid or resolved outstanding debt owed to the City of Chicago will be reviewed. BACP will contact license applicants if a meeting is necessary in regards to the license application. Please keep a copy of the submitted application documents.

► The following documents must be submitted with your application:

1. A fully executed and notarized INITIAL Taxicab Two-Way Dispatch Service License Application.
2. Articles of Incorporation/Organization for the company or proof of other ownership structure.
3. Corporate minutes/operating agreement with the selection of officers & percentage of ownership.
4. Certificate of Good Standing from the Secretary of State of Illinois, Corporate Division, or a "Corporate File Detail Report" downloaded from the Secretary of State's Web site indicating a status of good standing.
5. Documentation indicating the company's principal place of business in the City of Chicago (examples are lease agreement or property tax record).
6. A written description of the taxicab two-way dispatch service, including a list of equipment, method of dispatch and hours of service.
7. For taxicab two-way dispatch via a radio frequency, a list of the FCC license number(s).
8. A copy of the taxicab two-way dispatch service agreement to be used between the company and all subscribers.
9. A list of all services provided by the taxicab two-way dispatch company to subscribers that are not listed in the dispatch agreement.
10. Submission of the taxicab two-way dispatch plan including a description of the procedure for assigning dispatch calls to drivers.
11. A list of all current subscribers, including their City of Chicago license number(s), name, affiliation (if any), Chicago business address and telephone number and residence address.
12. Payment Taxicab Two-Way Dispatch Service License fee of \$500.00. The fee must be paid by credit card, certified check or money order before the license application is approved and license issued.



City of Chicago
Business Affairs and Consumer Protection
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INITIAL Taxicab Two-Way Dispatch Service License Application

1. Name of Company: _____

Address: _____

City/State/Zip: _____

Web site address: _____

E-mail address: _____

Business Telephone Number: _____

Dispatch Telephone Number for Public Use: _____

Number of Available Lines for Public Calls: _____

Business Fax Number: _____

2. State of Illinois Corporate File #: _____

Registered Agent Name: _____

Address: _____

City/State/Zip: _____

E-mail address: _____

Telephone Number: _____

3. Complete the information below for all corporate officers/members, shareholders or owners.

Use a separate sheet if needed.

Full Name: _____

Title(s): _____

Percentage of Ownership: _____

Address: _____

City/State/Zip: _____

E-mail address: _____

Telephone Number: _____

Date of Birth (DD/MM/YYYY): _____ SSN: _____

Full Name: _____

Title(s): _____

Percentage of Ownership: _____

Address: _____

City/State/Zip: _____

E-mail address: _____

Telephone Number: _____

Date of Birth (DD/MM/YYYY): _____ SSN: _____

Full Name: _____

Title(s): _____

Percentage of Ownership: _____

Address: _____

City/State/Zip: _____

E-mail address: _____

Telephone Number: _____

Date of Birth (DD/MM/YYYY): _____ SSN: _____

Full Name: _____

Title(s): _____

Percentage of Ownership: _____

Address: _____

City/State/Zip: _____

E-mail address: _____

Telephone Number: _____

Date of Birth (DD/MM/YYYY): _____ SSN: _____

4. List the affiliations to which you plan to provide taxicab two-way dispatch service:

5. Attach a detailed written description of the taxicab two-way dispatch system to be used in the upcoming licensing term and a copy of the contract for service. Include reference to all equipment, method of dispatch, hours of service, etc.:

Name of taxicab two-way dispatch company: _____

If applicable, FCC License Number: _____ Expiration date: _____

Description of Equipment: _____

ANY CHANGES MADE TO THE INFORMATION CONTAINED IN THIS APPLICATION MUST BE REPORTED IN WRITING TO BACP WITHIN FORTY-EIGHT HOURS OF THE CHANGE.

I affirm that all the information given in this license application is true and correct. I understand that any misstatements, inaccuracies and/or omissions made by me in this application (intentional or unintentional) will result in the denial of my license application or the revocation of any license granted pursuant to this application.

I hereby give my consent for the City of Chicago to obtain my complete criminal and motor vehicle driving history records.

Under penalties as provided by law, including, but not limited to, Chapter 1-21 of the MCC, I certify that the above statements are true and correct.

SIGNATURE: _____

PRINT NAME: _____

TITLE / RELATIONSHIP TO APPLICANT: _____

DATE: _____

Subscribed and sworn to before me this _____ day of _____, 20____

_____, Notary Public