



2017 Ground Transportation Operator Permit Application

Instructions: Failure to complete any item will delay the processing of your application.

A non-refundable fee must be paid at the time of application: One hundred dollars (\$100) for a new application and fifty (\$50) dollars for a renewal.

Please submit your application in person and bring in and provide your:

Original Valid Driver's License Original Valid work documentation

Input boxes for New Application and Renewal.

Renewal Defined: Working for the same company, with no lapse of permit.

Circle one: Fee Paid Not Paid Initial:

*****PRINT LEGIBLY*****

Business License Number: Business Phone number:

Name of the Ground Transportation Business you will be driving for:

Operator Name, Date of Birth, Last Name, First, Middle, Place of Birth, City, State, Country, DL#, State, Expiration date.

List all other states that you have previously held a Driver's License:

Gender M F Height Weight Hair Eyes Race

Social Security Card number:

Mailing Address:

Physical Address:

Length of time at current residence

Address of place of residence(s) during the past three years if other than present address

1, 2, 3, 4 address lines

Have you ever applied for an Operator's Permit before and if so, when?

Have you ever had an Operator's Permit issued by the Town of Jackson revoked or denied? Yes No

Have you ever been convicted of a felony in the U.S.? Yes No

If yes: Date Location

Are you a citizen of the United States? Yes No If no, complete the next question.

Do you possess a valid work permit for the United States? Yes No

I, do hereby swear and affirm the information I have supplied in this application is true and correct to the best of my knowledge.

STATE OF WYOMING)

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COUNTY OF TETON)

SIGN YOUR NAME WHILE IN FRONT OF THE NOTARY

SUSCRIBED AND SWORN TO BEFORE ME BY

this day of 20

Printed Name of Applicant

WITNESS my hand and Official Seal

Notary Public

Driver's License

Valid Work Documentation

If Denied:

Mailed Certified / Return Receipt Notice

APPROVED

DENIED

By:

Date:

Date:

Date: