

STATEMENT IN SUPPORT OF OBTAINING/RENEWING
LICENSE TO OPERATE TAXICAB IN MOSCOW, IDAHO

EACH DRIVER MUST COMPLETE FORM (2 sides) AND SIGN BEFORE A NOTARY PUBLIC

I, _____ hereby certify that I have read Moscow City Code Section 9, Chapter 5, and as required in Moscow City Code 9-5-8, am not disqualified from obtaining or renewing a taxicab license under that ordinance. Specifically, I have **not been convicted of**, found guilty of, pled guilty to, or admitted to the elements of **any of the following enumerated crimes or any substantially similar provision** of foreign criminal violation notwithstanding the form of judgment **within three (3) years** immediately prior to date of this application for license or license renewal; **including any crime of physical violence against persons, including** but not limited to **battery and domestic battery**; and including **any felony** under the Idaho Code:

IDAHO CODE SECTION

- 18-8001 Driving Without Privileges (driver's license revoked, disqualified, suspended)
- 18-8004 Driving while under the influence of alcohol, drugs or any other intoxicating substances
- 18-8004A Persons under 21 driving with less than 0.08 alcohol concentration
- 18-8004C Excessive alcohol concentration (.20 or more)
- 18-8005 Penalties
- 18-8006 Aggravated driving while under the influence of alcohol, drugs, or any other intoxicating substances
- 18-8007 Leaving Scene of Accident Resulting in Injury or Death
- 49-1401(1) Reckless Driving

I authorize the City of Moscow to run my driver's license number to check my driving history.
I hereby certify that everything contained within this Statement is true and correct.

Driver's License No. _____ State _____

Dated this _____ day of _____, 201__.

Signature

Subscribed and sworn to before me this _____ day of _____, 201__.

NOTARY PUBLIC in and for the State of Idaho

Residing at _____.

My Commission Expires: _____.

PLEASE PRINT

NAME OF TAXI COMPANY: _____

Name of Driver: _____

Address: _____ City: _____ ZIP: _____

Telephone: Home: _____ Business: _____