## Westlock

10003 106 Street Westlock, AB T7P 2K3 Phone: 780-349-4444 planning@westlock.ca

## Chauffeur License Application

Name of Chauffer:			
Operating For Taxi Business:			
Address:	City:	Prov.:	_ Postal Code:
Phone:	E-mail:		
Alberta Drivers' License Number:			
In the Town of Westlock, in the Province	of Alberta, I		DO HEREBY STATE:
1. That I am a bonafide applicant for permission to hold a License from the Town of Westlock to operate a taxi cab within the limits of the Town of Westlock, according to the conditions set out in Taxi Bylaw No. 2019-02 of the said Town.			
2. That I agree to abide by all provisions of the Town of Westlock Taxi Bylaw No. 2019-02.			
3. That I have provided proof of an Alberta Class 2, 3, or 4 Operator's License including a drivers abstract dated within 30 days of this application.			
4. That I have supplied the Town with a current, within 90 days of this application, Criminal Records Check.			
ANY STATEMENT HEREIN MADE if subsequently found to be false or misleading, will result in the immediate revocation of this License.			
I HEREBY CERTIFY that the statements above are true and correct:			
SWORN BEFORE ME at the Town of Westlock			
in the Province of Alberta, this day of, 20, 20			
Commissioner for Oaths		<b>e</b> 11	licant to be subscribed in Office, Westlock, Alberta
Collection and use of personal information			

Personal information is collected under the authority of s. 4(c) of the Protection of Privacy Act and will be used in the management and administration of the Town of Westlock business license and economic development processes. Information related to your license application and/or any licence(s) issued may be disclosed as allowed or required by law. If you have any questions about the collection, use or disclosure of your personal information, contact the Access to Information and Protection of Privacy Coordinator at 780-349-4444.