

Please Check: Original Application Renewal Amended Application

CITY OF BURLINGTON

CARRIAGE SERVICES APPLICATION

\$60 FEE FOR FIRST CARRIAGE AND \$30 FOR EACH ADDITIONAL ARE DUE UPON APPLICATION.

FOR OFFICE USE ONLY:	Date Council Approved: _____	License No. _____
Date Received: _____	Amt. pd: _____	(Cash <input type="checkbox"/> CC <input type="checkbox"/> Check#: _____)
Forwarded to: <input type="checkbox"/> Police Chief	<input type="checkbox"/> Fire Chief	<input type="checkbox"/> DPW
		<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments: _____		

- Please fill in all blanks completely, as incomplete applications will be rejected.
- Annual license expires June 30th each year.

ATTACH THE FOLLOWING DOCUMENTS:

- Copy of insurance policy (see Ordinance 1707(21) for full explanation of minimums required)
- Copy of Carriage Operator(s) photo i.d. (must have photo i.d. for each operator)
- Current Veterinary Certificate that the animal(s) pulling all carriages are in good health
- Detailed Route Map (to be approved by the Police Department prior to Council approval)

BUSINESS INFORMATION

Business Name:		
Business Address (Physical):	City	State/Zip
Mailing Address (if different):	City	State/Zip
# of Years in Business:	Phone Number:	Website:
List other municipalities you are currently or have been licensed in:	Year Started:	Year Ended:
Number of Carriages to be Operated in the City:	Seating Capacity:	
Hours of Operation:		

BUSINESS OWNER / AGENT INFORMATION

Owner Last Name:	First Name:	Middle Name:
Current Address:	Apt#	City
Date of Birth:	Phone Number:	Email:
State/Zip		
Driver's License #:	Exp. Date:	State Issued:

CARRIAGE OPERATOR(S)

Last Name:		First Name:		Middle Name:	
Address:			Apt#	City	State/Zip
Date of Birth:		Phone Number:		Email:	
Driver's License #:			Exp. Date:	State Issued:	
Other Municipalities in which you are licensed:					

****Attach information on any additional drivers on a separate page.**

ROUTE INFORMATION

Location of Carriage While Waiting for Fares:

Route Description (include detailed map – to be approved by the Police Department):

PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

Have you provided the City of Burlington with proof of liability insurance?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Have you provided route information for the review and approval from the Police Department?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Have you provided the City Clerk with a current Veterinary Certificate that animal(s) pulling all carriages are in good health?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Have you maintained the condition of all carriages in a clean and sanitary manner and are carriages in good repair and maintenance?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Are carriages equipped with operative brakes and a harness attachment so the horses cannot break away from harness of carriage?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
If this is a renewal, are there any changes to your carriage operation that the City should be aware of? If yes, please explain below:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Certification: I do hereby swear, under penalty of perjury, that I am the person who made and signed the foregoing application for a Carriage License, and that all statements herein are complete, true, and correct. I further understand a full background investigation may be conducted by the Burlington Police Department prior to my consideration of this application. Additionally, I understand that this application may be denied if it contains any falsification and that I will not be able to renew my application, if it was falsified, for a 6 month period. I do further agree to comply with all laws, resolutions, ordinances, and regulations, federal, state or local – pertaining to the operation of a Carriage **within the City of Burlington.**

Signature of Applicant: _____ Date _____