



# TAXI CAB PERMIT PROGRAM

## TAXI CAB INSPECTION FORM

**FORM MUST ACCOMPANY EACH VEHICLE**

### Company Information

<b>Taxi Company</b>	
<b>Company Address</b>	
<b>Business Phone No.</b>	
<b>Taxi Company Owner</b>	

### Vehicle Information

<b>Cab No.</b>		<b>Year</b>	
<b>Make</b>		<b>Model</b>	
<b>Color</b>		<b>Lic. Plate No.</b>	

Inspection Result:	
<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL

Retest Only:
<input type="checkbox"/> PASS

\*I certify that the appropriate work(s) have not been carried out on this vehicle and now complies with the inspection requirement set above and to the best of my knowledge found no conditions that place the customers or general public at risk.

\_\_\_\_\_  
Inspection Agency Name:

\_\_\_\_\_  
Inspection Date:

\_\_\_\_\_  
Print Name of Person Inspecting:

\_\_\_\_\_  
Signature of Person Inspecting:

**Pass    Fail    Reason for Failure**

	Pass	Fail	Reason for Failure
<b>Side View Mirrors</b>			
<b>Rear View Mirrors</b>			
<b>Seat Belts</b>			
<b>Head Lights</b>			
<b>Tail Lights</b>			
<b>Brake Lights</b>			
<b>Horn</b>			
<b>Brakes</b>			
<b>Tires</b>			
<b>Steering</b>			
<b>Fire Extinguisher – Type 2A:5BC</b>			
<b>Other: any condition that would place customers or the general public at risk</b>			

### FOR OFFICIAL USE ONLY

<b>Business Lic. No:</b>		<b>Date Approved:</b>		<b>Approved By:</b>	
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