

CITY OF UNALASKA
P.O. BOX 610
UNALASKA, ALASKA 99685
(907) 581-1251

APPLICATION FOR TAXI PERMIT LEASE

LESSOR	
TAXI PERMIT NO. _____	
OWNER(S) NAME: _____	
BUSINESS NAME: _____	
MAILING ADDRESS: _____	
PHONE: _____	
TERM OF LEASE: _____	TO _____
LEASEE	
NAME: _____	
BUSINESS NAME: _____	
MAILING ADDRESS: _____	
PHONE: _____	
PERMIT OWNER/LESSOR	

CITY CLERK'S OFFICE USE ONLY					
LESSOR					
BUSINESS LICENSE CLOSED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	SALES TAX PAID:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
PROPERTY TAX PAID:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	PERMIT UNDER REVOCATION:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
PERMIT UNDER SUSPENSION:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	PERMIT UNDER DENIAL:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
LEASEE					
APPLICATION COMPLETE:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	BUSINESS LICENSE PAID:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
INSURANCE ATTACHED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	VEHICLE INSPECTION ATTACHED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
METER INSPECTION ATTACHED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	APPLICATION PAID:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
COMMENTS: _____					
_____			_____		
Date			CITY CLERK		

DEPARTMENT OF PUBLIC SAFETY USE ONLY					
FINGERPRINTS:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	CRIMINAL BACKGROUND CHECK:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
RECOMMENDATION:	APPROVE <input type="checkbox"/>		DENY:	<input type="checkbox"/>	
COMMENTS: _____					

Date			DEPT. OF PUBLIC SAFETY		

DEPARTMENT OF ADMINISTRATION USE ONLY	
APPROVE: <input type="checkbox"/>	DENY: <input type="checkbox"/>

Date	City Manager