



City of Winston-Salem Department of Transportation

Suite 307, Stuart Municipal Building, 100 E. First Street, Winston-Salem, North Carolina

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR THE OPERATION OF TAXICABS AND LIMOUSINES IN THE CITY OF WINSTON-SALEM, NORTH CAROLINA

Application shall be accompanied by a hundred dollar (\$100.00) application fee payable to the City of Winston-Salem

TO THE CITY COUNCIL OF THE CITY OF WINSTON-SALEM:

As required by Chapter 78 of the Winston-Salem City Code, the undersigned hereby makes application for a Certificate of Public Convenience and Necessity for _____ and for that purpose hereby certifies the following information required by Section 78-42 of the City Code, and does hereby represent and affirm that the information given is true.

1. Name of Owner: _____
(State whether an individual, partnership or corporation and list all names. If corporation, attach certified copy of Articles of Incorporation. If association, attach certified copy of bylaws. If partnership, attach certificate that partners are doing business as a partnership.)

2. Date of Birth of Each Name Listed: _____

3. Social Security Number of Each Name Listed: _____

4. Business Address: _____

5. Telephone Number: _____

6. The proposed operation is financed as follows: _____

(If the proposed operation is financed entirely by the applicant that should be stated. If the proposed operation is financed wholly or partly by means of borrowed money or capital in any form furnished by any person other than the owner, the name of the person lending the money or furnishing the capital must be disclosed.)

7. Financial statement of the applicant is attached hereto and made a part of this application.

8. List any unpaid or unbounded judgments of record against such owner, title of all actions and the amounts of all judgments unpaid or unbounded, mid reference to the judgment docket and page where judgment is recorded:

9. A. Number of vehicles owned: _____

B. Number of vehicles actually operated by applicant on day of application, if any: _____

C. Number of vehicles to be operated under the certificate applied for: _____

10. Attach criminal record of applicant, if any. If applicant is a corporation, criminal record of officers, directors, supervising employees, including manager, if any.

11. Location and description of business office and terminals: _____

12. Experience of applicant in the transportation of passengers for hire: _____

13. Statement of reason the applicant believes that the public convenience and necessity would be served by the granting of this application: _____

Signature of Applicant

Application shall be accompanied by a \$100.00 application fee payable to the City of Winston-Salem.

One Hundred dollars and no cents (\$100.00) received of _____

This the _____ day of _____, 20__.

Received by _____



City of Winston-Salem City Secretary

Suite 140, City Hall, 101 N. Main Street

TAXI CAB FINANCIAL STATEMENT SUBMITTED TO THE CITY OF WINSTON-SALEM, NORTH CAROLINA

Name _____ Occupation _____

Address _____ State _____ Zip _____

| ASSETS | | LIABILITIES | |
|----------------------------|-----------------|---|-----------------|
| Cash | \$ _____ | Notes payable to Banks (Schedule C) | \$ _____ |
| Bank accounts _____ | _____ | Notes & Accounts due others (Schedule C) | _____ |
| Bank accounts _____ | _____ | Unpaid taxes City & County | _____ |
| Notes & Accounts due me | _____ | State | _____ |
| Cash value of Life Ins. | _____ | Federal | _____ |
| Stock & bonds (Schedule B) | _____ | | |
| Autos | _____ | | |
| Real estate (Schedule A) | _____ | Real estate mortgages and assessments (Schedule A) | _____ |
| Other assets (Itemize) | _____ | | |
| _____ | _____ | TOTAL LIABILITES | _____ |
| _____ | _____ | TOTAL NET WORTH | _____ |
| TOTAL | \$ _____ | TOTAL | \$ _____ |

My total **CONTINGENT LIABILITY** as endorser, guarantor, partner and otherwise does not exceed \$ _____

My **EARNED INCOME** (salary, commissions, fees, etc.) for 20__ was \$ _____

OTHER INCOME from _____ for 20__ was \$ _____

Deduct **TAXES**
NET INCOME \$ _____

I warrant that there are no judgments against me nor lien unsatisfied upon my property except as shown, no prior suit pending against me in any court, that no assets are pledged in any manner not shown herein, and that this statement is true and complete and is offered for the purpose of obtaining a license in accordance with ordinance(s) of the City of Winston-Salem, North Carolina.

Signature _____ Signature _____

Date _____

Date _____

PLEASE COMPLETE SCHEDULES BELOW

**FINANCIAL STATEMENT
SUBMITTED TO THE CITY OF WINSTON-SALEM, NORTH CAROLINA**

SCHEDULE A – REAL ESTATE AND MORTGAGES AND ASSESSMENTS ON REAL ESTATE

| Size of Land | Type of Building Location | Mortgages & Assessments | Payable | Tax Value | Market Value |
|--------------|---------------------------|-------------------------|----------|--------------------|--------------|
| _____ | _____ | _____ | \$ _____ | \$ _____ per _____ | |
| \$ _____ | \$ _____ | | | | |
| _____ | _____ | _____ | \$ _____ | \$ _____ per _____ | |
| \$ _____ | \$ _____ | | | | |
| _____ | _____ | _____ | \$ _____ | \$ _____ per _____ | |
| \$ _____ | \$ _____ | | | | |

Total FIRE INSURANCE \$ _____ \$ _____ \$ _____ \$ _____
Title to all real estate is in my name solely and unencumbered, except as shown.

SCHEDULE B – STOCKS & BONDS

| Name of Issuer and Type of Security | No. of Shares | Market Value (Per Share) | Total Market Value |
|-------------------------------------|---------------|--------------------------|--------------------|
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| Total | | | \$ _____ |

All securities listed are mine solely, and are in my possession except as shown hereon.

SCHEDULE C – DEBTS PAYABLE TO BANKS AND OTHERS

| Name of Bank or Debtor | Collateral | Payable | Unpaid Balance |
|------------------------|------------|--------------------|----------------|
| _____ | _____ | \$ _____ per _____ | \$ _____ |
| _____ | _____ | \$ _____ per _____ | \$ _____ |

| | | | |
|---|--|--------------------|-----------------|
| | | \$ _____ per _____ | \$ _____ |
| | | \$ _____ per _____ | \$ _____ |
| TOTAL PAYABLE TO BANK | | | \$ _____ |
| <i>PAYABLE TO OTHERS</i> | | | |
| | | \$ _____ per _____ | \$ _____ |
| | | \$ _____ per _____ | \$ _____ |
| | | \$ _____ per _____ | \$ _____ |
| Loans on Cash Value of Life Insurance | | | \$ _____ |
| TOTAL NOTES AND ACCOUNTS DUE OTHERS (All amounts over \$100) | | | \$ _____ |
| | | | |
| | | | |

| | |
|-------------------------------------|--|
| print, complete and submit form to: | City Secretary, City of Winston-Salem P.O. Box 2511 Winston-Salem, NC 27102-2511 |
| | Office: (336) 727-2224 Fax: (336)727-2880 |

What happens next?

Once the application and \$100.00 fee for Certificate of Public Convenience and Necessity for the Operation of Taxicabs and Limousines are received in the City Secretary's Office the application will be forwarded to the Taxi Inspector in the Winston-Salem Department of Transportation and then to City Council for approval.

Expect three (3) to four (4) months for the process to be completed. If you have any questions, please call (336)727-2224.