



CITY OF MIDDLETOWN
MIDDLETOWN, NEW YORK
APPLICATION FOR VEHICLE TRANSFER OF TAXI MEDALLION

SAME OWNER/DIFFERENT VEHICLE -- Fee: \$250.00

Date of Application _____ Medallion Number _____

I, the undersigned, do hereby make application to transfer a taxicab medallion pursuant to Section 433 of the Code of the City of Middletown as adopted and amended and provide the following information for said application:

Name: _____

Doing Business As: _____

Business Address: _____

Home Address: _____

Telephone: Business _____ Home: _____

Description of **Original Vehicle**: Make _____ Year _____

Vin # _____ State License No: _____

Seating Capacity _____

Description of **New Vehicle** to be used: Make _____ Year _____

Vin# _____ State License No. _____

Seating Capacity _____

_____, being duly sworn, deposes and says that he/she is the individual making the foregoing application for a licensed taxicab, and that the answers to the foregoing questions and other statements contained therein are true and correct according to the best of his/her own knowledge.

Signature of Applicant

Date

Subscribed and sworn to before me this

_____ Day of _____

Notary Public

City of Middletown
Middletown, New York

Medallion Number _____

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TO BE FILLED OUT BY THE CHIEF OF POLICE OR HIS DESIGNEE

Is the medallion transfer approved? _____ If so, has new vehicle been inspected?
_____ Date of Inspection _____

Inspection performed by _____ NYS ID# _____

Has vehicle been found to be in a safe condition for the transporting of passengers,
under NYSDOT specifications? _____

If not, date of scheduled re-inspection _____

If vehicle has not been inspected, date of scheduled inspection _____

Operator is insured by a public liability policy for damages in the following amounts:

For death or injuries to persons \$ _____

For damages arising out of any accident \$ _____

COPIES OF INSURANCE POLICIES MUST ACCOMPANY THIS APPLICATION

Chief of Police or designee's signature

Date

TO BE FILLED OUT BY THE CITY CLERK'S OFFICE:

A fee of \$250.00 was collected on _____

For _____ medallion Medallion Number(s) _____

Was insurance certificate(s) presented/attached with this application? _____

Signature of Clerk or Designee

Date