## **FINANCE DEPARTMENT, Business Licenses**



101 Schaumburg Court, Schaumburg, IL 60193 Phone: 847.895.4500

BusinessLicense@villageofschaumburg.com

## **CHAUFFEUR'S LICENSE APPLICATION**

**Regional Licensing Group** – Arlington Heights, Buffalo Grove, Deerfield, Elk Grove Village, Hoffman Estates, Northbrook, Rolling Meadows, Schaumburg

<ul> <li>REQUIRED DOCUMENTS MUST BE PROVIDED AT TIME OF APPLICATION:</li> <li>Driving record abstract (MVR), not older than 60 days, from the Illinois Secretary of State.</li> </ul>				Fee: \$105.00	
<ul> <li>Fingerprint background invo Police Department approve application fee below).</li> </ul>	estigation, no older than	60 days, from a Village of S	Schaumburg	included in the	
Payment Type:	Cash	Charge Check	<pre>&lt; #</pre>		
	APPLICA	NT INFORMATION:			
Name:					
Home Address:					
City:		State:	Zip: _		
Home Phone #:		Business Phone #	:		
IL Drivers License #	Date	e of Birth:	Place of Birth	n:	
Sex: Race:	Eye Color:	Hair Color:	Height:	_ Weight:	
Restrictions:					
Name of Present Taxi or Limo Comp	oany:				
Do you have a valid Illinois Dr	rivor's License?		Yes 🗌	No 🗌	
Do you have a valid Illinois Driver's License?  Has your Drivers License, in any State, ever been suspended or revoked?			Yes	No 🗌	
Can you read, write and understand the English language?			Yes	No $\square$	
Have you been convicted of a felony or misdemeanor within the last five				No $\square$	
Do you have any outstanding tickets, of any type, or unpaid fines to the V				No 🗍	
Do you have any tattoos or pr		·	Yes	No	
	EMPLO'	YMENT HISTORY			
Employer:		From	າ:	To:	
STATEMENT OF APPLICANT: I understand that failure to supply non-issuance of a license or revo	y required information	or to give false informati			
Signature of Application:			Date:		
Chauffeur Sticker #	Previous #	<b>#</b>	Taxi Sticker #		