



2020 Ground Transportation Operator Permit Application

Instructions: Failure to complete any item will delay the processing of your application.

A non-refundable fee must be paid at the time of application: One hundred dollars (\$100) for a new application and fifty (\$50) dollars for a renewal.

Please submit your application in person and bring in and provide your:

Original Valid Driver's License Original Valid work documentation

New Application Renewal

Renewal Defined: Working for the same company, with no lapse of permit.

Circle one: Fee Paid Not Paid Initial:

*****PRINT LEGIBLY*****

Business License Number: _____ Business Phone number: _____
 Name of the Ground Transportation Business you will be driving for: _____

Operator Name				Date of Birth	/ /
	Last Name	First	Middle		mm/dd/YYYY
Place of Birth				Provide your phone number below:	
	City	State	Country	()	-
DL#	State	Expiration date:			

List all other states that you have previously held a Driver's License:

Gender M F Height Weight Hair Eyes Race _____

Social Security Card number: _____ - _____ - _____

Mailing Address: _____

Physical Address: _____

Length of time at current residence _____

Address of place of residence(s) during the past three years if other than present address

1 _____ 2 _____
 3 _____ 4 _____

Have you ever applied for an Operator's Permit before and if so, when? _____

Have you ever had an Operator's Permit issued by the Town of Jackson revoked or denied? Yes No

Have you ever been convicted of a felony in the U.S.? Yes No

If yes: Date _____ Location _____

Are you a citizen of the United States? Yes No If no, complete the next question.

Do you possess a valid work permit for the United States? Yes No

knowledge. Further, I do hereby consent to the release of all medical, physical, criminal and any other information, including information of a STATE OF WYOMING)

COUNTY OF TETON) § _____
 SIGN YOUR NAME WHILE IN FRONT OF THE NOTARY

SUSCRIBED AND SWORN TO BEFORE ME BY
 this _____ day of _____ 2020 _____

Printed Name of Applicant
 WITNESS my hand and Official Seal

 Notary Public

Driver's License APPROVED Date: _____
 Valid Work Documentation DENIED Date: _____
 If Denied: By: _____
 Mailed Certified / Return Receipt Notice Date: _____