



## APPLICATION FOR CHANGE OF VEHICLE

Re: Vehicle change request

Note: Applicant must submit copy of current and proposed vehicle registrations

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Medallion No.: \_\_\_\_\_ Island: \_\_\_\_\_

Driver's License No: \_\_\_\_\_ Badge No: \_\_\_\_\_

### REASON FOR REQUESTING VEHICLE CHANGE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous taxi vehicle: \_\_\_\_\_

VIN # \_\_\_\_\_ Color: \_\_\_\_\_ Seating Capacity: \_\_\_\_\_

Proposed taxi vehicle: \_\_\_\_\_

VIN# \_\_\_\_\_ Color: \_\_\_\_\_ Seating Capacity: \_\_\_\_\_

Approval of this request to change vehicle does not release me of my obligation to service local residents.

Applicant: \_\_\_\_\_ (Attach copy of vehicle registrations)

-----FOR TCC OFFICE USE ONLY-----

Date: \_\_\_\_\_ Approved (  ) Disapproved (  )

TCC Executive Director: \_\_\_\_\_