



Environmental Protection and Growth Management Department
ENVIRONMENTAL AND CONSUMER PROTECTION DIVISION
1 North University Drive, Box #302 • Plantation, Florida 33324 • 954-765-4400 • broward.org/consumer

Taxicab Permit Application Information and Instructions

Supporting Documents

You must attach the following supporting documentation to your application:

- A copy of your current vehicle registration
- A copy of your current vehicle inspection report
- A copy of your current certificates of insurance
- A copy of current Broward County Business Tax Receipt (AKA "Occupational License")



Note: certificates of insurance must prove adequate insurance coverage and be in full force and effect. The certificates must list the **Broward County Environmental and Consumer Protection Division as a certificate holder** and must provide at least **30 days advance notice of cancellation**. Certificate of auto liability insurance must indicate minimum limits of **\$125,000/\$250,000/\$50,000** For **each vehicle**, submit a certificate with the year, make and Vehicle Identification Number (VIN); for a **fleet of vehicles**, provide a schedule listing the vehicles with year, make and VIN.

Permit Fees

- Taxicab Registration (*per permit*)**\$200**
- Renewal Late Fee (*per permit*).....**\$50***

*Assessed on payments received after May 31

All permits expire June 30. Each vehicle must be inspected by June 30 to be permitted to operate during the following year.

Payment Methods

- **Business Check**
Make checks payable to: *Broward County Board of County Commissioners*
- **Credit Card**
Complete a credit card authorization form.

Return this application with all necessary documentation and payments to the address above.



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Taxicab Permit Application

Renewal Application Replacing Vehicle Permit Year

Business Information

Individual Partnership Corporation

Business Name	Business Account MC#		
DBA Name, if different	Business Owner Name		
Business Address	City	State	Zip
Business Mailing Address	City	State	Zip
Business Phone	Business Fax		
Business Mobile Phone	Contact Person Name		

Permit Information

Taxicab Permit(s) _____ @ \$200 ea. = \$ _____
 Renewal Late Fee _____ @ \$50 ea. = \$ _____

 Total: \$ _____

Taxicab dispatch company these permits will operate under: _____

Permit #			
1 _____	8 _____	15 _____	22 _____
2 _____	9 _____	16 _____	23 _____
3 _____	10 _____	17 _____	24 _____
4 _____	11 _____	18 _____	25 _____
5 _____	12 _____	19 _____	26 _____
6 _____	13 _____	20 _____	27 _____
7 _____	14 _____	21 _____	28 _____

I certify, under penalty of law that the information provided on this application is true and correct and I acknowledge that I am aware that all information I provide with my application, except credit card numbers, is a matter of public record and is not considered confidential.

Signature

Date