



CITY OF EAST WENATCHEE

City of East Wenatchee
Office of the City Clerk
271 9th Street NE, East Wenatchee, WA 98802
Ph. 509-886-6103 fx. 509-884-6233

Application for Taxicab Vehicle License

Date: _____

Taxicab Company Name: _____

Physical Address: _____
Street Add *City* *State, Zip*

Mailing Address: _____
Street Add *City* *State, Zip*

Business Phone Number: _____ Owner Name: _____

Vehicle Information:

Vehicle to be Licensed: _____
Make/Model *Year* *Cab Number:*

Vin Number: _____ Color: _____

License Plate No.: _____ Expiration Date: _____

Insured by: _____ Policy Number: _____

Agent Name: _____ Agent Ph. No. _____

For City use - do not write below this line:

City Vehicle License Number: _____

Vehicle inspection completed and approved _____ Date: _____

\$50.00 fee for first vehicle inspection & license \$25.00 fee for each additional vehicle

Receipt No: _____ Receipt Date: _____

Issue Date: _____ Approved by: _____

**** One Application must be submitted for each vehicle being licensed.**