Vehicle inspection request form

Please print or type the following information

Please check all that apply

☐ New vehicle inspection  ☐ Replacement inspection  ☐ Already permitted vehicle inspection  ☐ Meter seal only

☐ Taxicab vehicle  ☐ Pedicab vehicle  ☐ Livery vehicle  ☐ Sightseeing vehicle

This form, along with the inspection fee and all other required documents, must be submitted before an inspection will be scheduled. After the completed inspection form, inspection fee and all other required documents have been submitted, a minimum of two business days is required before an inspection can be scheduled.

Please fill out all that apply. Do not leave any blank spaces. Write "N/A" in any space that is not applicable

Company name __________________________________________________________ Date _______________________

Applicant's name __________________________________________ Phone __________________________

<table>
<thead>
<tr>
<th></th>
<th>Fleet number</th>
<th>Permit number</th>
<th>Last six VIN digits or serial number</th>
<th>Year</th>
<th>Make</th>
<th>Vehicle type (i.e., van, car, carriage)</th>
<th>License plate number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original vehicle</td>
<td></td>
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<td>Replacement vehicle</td>
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Taximeter make _____________________________ Taximeter serial number _____________________________

In addition to this form, the following items must be submitted before an inspection will be made

[ ] $22 vehicle inspection fee
[ ] Legible copy of state vehicle registration form
[ ] Certificate of insurance with a list of all insured vehicles
[ ] Legible copy of most recent Regulated Industries Division inspection report
[ ] Waiver vehicles only – State vehicle inspection form (completed within the past six months)
[ ] Replacement inspections only – Vehicle permit(s) (If permit(s) are stolen, submit a police report, or if permit(s) are lost, submit a notarized statement)
[ ] $8 replacement decal fee

No vehicle will be inspected without complete paperwork and paid fees

Office use only – Do not write in space below

Date items submitted _________________ Date of scheduled inspection _______________________

Fee submitted $_________ Processed by ___________________________