

9. Attach copies of the appropriate following documents to verify that each vehicle proposed to be operated by the applicant is owned, leased or under contract by the applicant:
 - a. certificate of title
 - b. lease/rental contract, or
 - c. other contract as appropriate.
10. Color scheme of vehicles: _____
- 10a. Attach color photographs of the front, rear, and both sides of a vehicle painted in the proposed color scheme including any logos or distinguishing markings.
11. Attach a description of the two-way communication system proposed to be used by the applicant.
12. Attach a description of the taximeter proposed to be used by the applicant.
13. Attach proof of insurance satisfying the requirements of Section 29-33(B) of the Killeen City Code.
14. Attach a current financial statement satisfying the requirements of Section 29-302(C)(1) of the Killeen City Code.
15. Attach a description of any past ground transportation service experience operated by the applicant.
16. Attach a description of any revocation or suspension of a taxicab business and/or other ground transportation service operated by the applicant.
17. Attach a description of the proposed taxicab operation.
18. Attach a detailed statement providing evidence demonstrating the public necessity and convenience for the proposed taxicab franchise.
19. Attach a statement describing the effect of the proposed taxicab service on existing taxicab services.
20. Attach a statement that the applicant(s) are not in default or arrears in any amount or way with or to the City of Killeen or any activity associated with the City of Killeen.
21. As applicable, attach a list of any outstanding judgments related to ground transportation service against the applicant or a person described in #2 of this application, or an affidavit that there are no outstanding judgments that arise out of circumstances related to ground transportation service against the applicant or a person described in #2 of this application.
22. A \$300.00 non-refundable operating authority application fee must be submitted with the application.

I, _____, applicant, do swear or affirm that all of the information included within this application is accurate, and I understand that any omitted information or information found to be inaccurate will result in the denial of this application for a taxicab franchise operating authority or the revocation of operating authority that is granted based on information provided in this application. I also swear or affirm that I have read and understand Chapter 29 of the Killeen City Code relating to Transportation, agree to provide citywide taxicab service in Killeen 7 days a week and 24 hours a day, and agree to comply with the terms as written and as may be amended.

Signature of Applicant

Title

Date

THE STATE OF TEXAS
COUNTY OF BELL

BEFORE ME, the undersigned authority, on this day appeared _____,
known to me to be the person whose name is signed to the foregoing application and duly sworn by me
states under oath that he has read the said application and that all of the facts therein set forth are true and
correct.

Sworn to before me, this, the _____ day of _____, 20_____.

Notary Public in and for Bell County, TX