



CITY OF BUFFALO
PERMIT & INSPECTION SERVICES
OFFICE OF LICENSES



TAXICAB or LIVERY License

1. Everyone applying for a **Taxi/Livery** plate must be licensed as a **City of Buffalo Taxi Driver**.
2. **Copy of NYS Vehicle Registration**
3. **Certificate of Automobile Liability Insurance for this vehicle.**
 - a. The certificate holder must name the **City of Buffalo, Office of Licenses, 301 City Hall, Buffalo, NY 14202** as the certificate holder with a ten (10) day cancellation clause.
 - b. The **description portion** must include the **vehicle's year, make and VIN Number**
4. **Worker's Compensation or Compensation Exemption Certificate**
 - a. When vehicle is **exclusively owner-operated** with **no employees**, submit Form CE-200, NYS **Compensation Exemption Certificate**. File online at www.wcb.state.ny.us **or** at a NYS Compensation Board, ex: 295 Main Street.
 - b. When the vehicle is **not** exclusively owner-operated, submit **Certificate of Workers' Compensation Insurance** naming the City of Buffalo, 301 City Hall, Buffalo, NY 14202 as the certificate holder with a ten (10) day cancellation clause.
5. **Certification for a New York State Taxi Plate**
 - a. Bring your registration card to the Office of Licenses and obtain a **MV 289 Form**.
 - b. Obtain a Taxi or Livery Plate from the NYS Dept of Motor Vehicles, 110 Pearl Street.
6. **Vehicle Inspection Report** from Police Department (Meter Check)
 - a. The maximum allowable vehicle age is 10 years from the most current licensing year.
 - b. Call 851-4411/851-4581 for a meter check with the Police Department.
 - c. After the meter check, bring completed application form to the Office of Licenses.
7. **License Fees**
 - a. Taxi \$115.00
 - b. Livery \$ 75.00

Office of Licenses
65 Niagara Square / 301 City Hall
Buffalo, NY 14202-3303
(716) 851-4078 / FAX: (716) 851-4952



CITY OF BUFFALO - BUSINESS LICENSE APPLICATION

65 Niagara Sq. City Hall Room 301 Buffalo, NY 14202

Phone (715) 851-4078 Fax (716) 851-4952

TAXI OR LIVERY APPLICATION

For office use only	
Application #	_____
City Plate #	_____
Date	_____

- Type of Entity:** Corporation Partnership
- Check type:** Taxi Cab Livery
- Medallion Transfer Car to Car Transfer

Business Name (dba) _____ **Business Phone** _____ - _____

Business Street Address: _____

Business Mailing Address: _____

NYS Tax ID # _____ **Business Website** _____ **E-Mail Address:** _____

Owner and Other Principal Partner (attach additional pages if required)

Name (last, first) _____ **Home Phone** _____

Home Address: (PO Box not acceptable) _____

Dispatcher Name (Livery) _____ **Dispatcher Phone: ()** _____ - _____

Dispatcher Address: _____

VEHICLE INFORMATION

VIN Number _____ **NYS Plate Number** _____

Year _____ **Make & Model** _____ **Color** _____ **Tire Size** _____

Taxi/Livery Meter # and Make _____ **Vehicle exclusively owned?** Yes No

Subscribed and sworn to and before me
this ____ day of _____ 20 ____

Commissioner of Deeds in and for the
City of Buffalo, New York

I am aware of the obligation to provide timely notice of any changes in required information, and I have informed all owners, managers, or other principals of their criminal and/or civic responsibility for the timely fulfillment of all restrictions and conditions to the license or timely abatement of any nuisance activity at or associated with the business. Initial _____

As an authorized agent of the entity identified above, I certify the information provided on this form is true, correct, complete and current to the best of my knowledge and belief.

Authorized Original Signature _____ **Print Name** _____

Date: _____