



CITY OF WESTBROOK
2 York St., Westbrook, ME 04092

COMMERCIAL HAULER APPLICATION

___ NEW ___ RENEWAL

Expires annually on December 31

Application fee = \$25.00
Background Investigation fee = \$35.00 (to be paid by new applicants only – a copy of the driver's license for each applicant must be submitted)
Annual License fee = \$150.00

NAME OF BUSINESS: _____ PHONE # _____

BUSINESS ADDRESS: _____

OWNER'S NAME (LOCAL/ONSITE): _____ DOB ___/___/___

MANAGER'S NAME: _____ DOB ___/___/___

FORM OF BUSINESS ORGANIZATION: Corporation Partnership Sole Proprietor

If Corporation or Partnership, give Name, Address & DOB of each owner:

Have you or any of the other owners ever had a business license denied/revoked? YES _____ NO _____

If yes, list name of person and reason: _____

Have you or any of the onsite Owners, Officers or Partners been convicted of a crime in the past ten (10) years?

YES ___ NO ___ If yes, list name of person, nature of conviction, date and State conviction took place in:

Please list the drivers for your Westbrook accounts:

DRIVERS' NAMES

DATE OF BIRTH

DRIVER'S LICENSE NUMBER

Have any of your drivers had any motor vehicle offenses during the past five (5) years or ever been convicted of reckless driving, drive to endanger, operation or attempting to operate under the influence? YES _____ NO _____

If yes, list driver, offense, date and State conviction too place in:

If a license is issued, I agree to abide by all applicable Federal, State and Local laws governing the operations of the business in the City of Westbrook. Any misleading or false information given may be cause for denial and/or revocation of this license. If this is a new application, I hereby authorize the Police Department and its representatives to conduct a background check on me and to verify the information contained in this application.

Date: _____

Applicant Signature _____

FOR OFFICE USE ONLY

REPORT OF INSPECTING OFFICERS:

_____ Approved _____ Denied POLICE _____

Comments:

License issued on: ___/___/_____

License # _____

Fees paid: Application fee _____ SBI fee _____ License fee(s) _____

Total amount paid = \$ _____