



**BROWARD COUNTY
CHAUFFEUR'S REGISTRATION
(HACK) APPLICATION**

PERMITTING, LICENSING AND CONSUMER PROTECTION DIVISION

1 N. University Drive, Box #302 • Plantation, Florida 33324 • 954-765-4400 • FAX 954-765-5309
www.broward.org/permittingandlicensing

<input type="checkbox"/> New Application <input type="checkbox"/> Renewal Application <input type="checkbox"/> Probationary Review	Business Account #	Chauffeur Registration HACK #	Prev Application Date	NEW HACK Expiration Date
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NOTICE: In applying for a Broward County Chauffeur's Registration, Broward County will review the driving record, criminal history and other information related to the applicant. The application and background record fees are **NONREFUNDABLE**, regardless of whether the application is approved or denied. The applicant may attach additional pages if required to fully answer any question.

Fees (apply to: new and renewal application)	Amount
Application & FDLE records	\$ 64.00
Out-of-State Records	See Chauffeur's Registration Fees (form # 207)
Late fee (within 1 yr after previous license expiration)	\$ 25.00

Personal Information & Authorization for Criminal Background Check

Failure to disclose information and/or information that is false or misleading may result in denial of license.

Applicant Name	Date of Birth	Birth Country
Also known as (AKA)		
Home Address (street, city, state & zip)	Home Telephone ()	Cell Telephone ()
Mailing Address (street, city, state & zip)	FL Driver's License #	Exp. Date
For EACH year below, what USA State did you live in?	Height _____	Eye Color _____
2011 _____	Weight _____	Hair Color _____
2010 _____	<input type="checkbox"/> Male	<input type="checkbox"/> US Citizen
2009 _____	<input type="checkbox"/> Female	<input type="checkbox"/> US Resident Alien
2008 _____	Race/Ethnic Categories	
2007 _____	<input type="checkbox"/> White (not Hispanic)	<input type="checkbox"/> American Indian or Alaskan Native
2006 _____	<input type="checkbox"/> Black (not Hispanic)	<input type="checkbox"/> Other _____
Note: An additional form MUST be completed if another (other than Florida) State is listed. Ask staff for form.	<input type="checkbox"/> Hispanic	
	<input type="checkbox"/> Asian or Pacific Islander	
	E-mail Address	

I understand that the Permitting, Licensing, and Consumer Protection Division will use my personal information to obtain information about my driving and criminal history.

X _____
Signature Date

Employer Information

Employer Business Name	Employer Phone #
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Failure to disclose information and/or information that is false or misleading may result in denial of license.

Yes No Have you ever had a chauffeur's registration (hack) denied, suspended, or revoked?

If yes, explain:

List **all** felony and misdemeanor cases since your 18th birthday (including driving under the influence of alcohol or drugs) for which you were **convicted, adjudication was withheld, and/or you pled *nolo contendere*** (no contest).

Date	Location	Charge(s)	Disposition

List **all pending** offenses, including felonies, misdemeanors, and traffic cases.

Date	Location	Arresting Agency	Case No.	Charge(s)	Expected Disposition Date

Yes No Do you have a current or previous addiction to drugs or alcohol?

If yes, explain.

If you have any history of felony or misdemeanor cases, cases involving driving under the influence of drugs or alcohol, or an addiction to drugs or alcohol, explain how you have rehabilitated yourself. You have the right to provide copies of documents to explain your rehabilitation

I certify that the above information and any attachments to this application are true and correct under penalty of law. I further understand that the Broward County Permitting, Licensing and Consumer Protection Division may deny this application based on my history, failure to disclose information, and/or information that is false or misleading.

I am acknowledging that I have received a copy of the Chauffeur's Registration Code of Conduct. I understand that as a condition of receiving and maintaining my Broward County Chauffeur's Registration, I am agreeing to abide by the Code of Conduct, and all applicable conditions, rules, and regulations contained in Chapter 22 1/2 of the Broward County Code of Ordinances. I understand and acknowledge that violations of the Code and/or Ordinance may result in suspension, revocation or non-renewal of this Registration.

X _____
Signature **Date**

PRIVACY ACT INFORMATION: The information on this form is requested pursuant to Chapter 22 1/2, Broward County Code of Ordinances, which regulates motor vehicles for hire, and will assist in obtaining a complete accurate background investigative report. Any information on this form may be disclosed as authorized by Chapter 119, Florida Statutes. Disclosure of the requested information, by you, is voluntary; however, failure to furnish that information would impose administrative difficulties which may result in delay in processing your application for chauffeur registration.

Return this Application to: Broward County Permitting, Licensing, and Consumer Protection Division
 1 N University Drive, Box #302
 Plantation, FL 33324
 954-765-4400 / Fax: 954-765-5309

OFFICE USE ONLY

Date Received: _____ Receipt #: _____ Amount Paid: _____ ID Card Control # _____ Valid FL Driver's Lic Processor: _____
 License: Pick-up Date _____ Picked up by _____