

Chauffeur's License Requirements:

- 1) Fill out a chauffeur's license application
- 2) Provide a "City of Cordova Commercial Vehicle Inspection Sheet"
 - Must be completed by a certified mechanic or the Police Department
- 3) Provide proof of owning a current City business license
- 4) Provide proof of current background check performed through Alaska State Troopers (application available in forms; CPD will be authorized to conduct these early 2017)
- 5) Provide a Driving Record from DMV. Records can be obtained locally or online through State's DMV website (NOTE: Only DMV can give out driving records).
- 6) Provide proof of having a physical within the past 30 days. Physicals may be obtained locally through CCMC or Ilanka Clinic - just tell them you need a DOT medical exam.
- 7) All documents must be turned in to CPD for approval by the Chief of Police
- 8) **If you are approved:**
 - You will be called into Dispatch to have a photo ID made
 - We will issue your Chauffeur license number
 - Pay Fees:
 - \$35.00 for Chauffeur's License (Full calendar year)
 - \$20.00 for License (any license issued after July 1st)
- 9) **If you are not approved:**
 - The Chief of Police will explain as to why the application was not approved.

Want more info? Check CMC6.24.010 - CMC6.24.140

Within Public Safety forms and included in this link:

Matrix

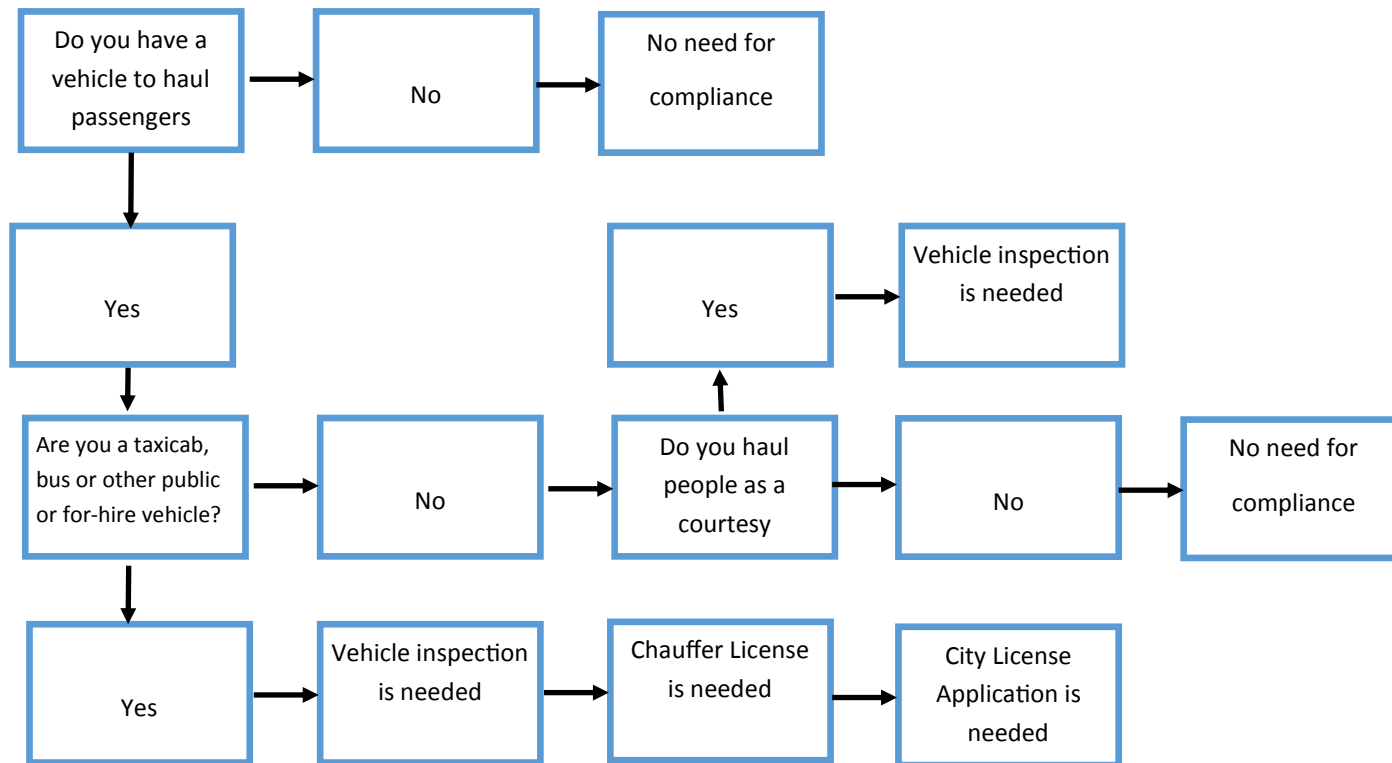
Chauffeur License Requirement List

Chauffeur License Application

Vehicle Inspection Sheet

AWT Background Check request

City of Cordova 'For Hire' Vehicle and Chauffer license matrix



**CORDOVA DEPARTMENT OF PUBLIC SAFETY
CHAUFFEUR'S LICENSE
APPLICATION**

I, _____, hereby make application for a license to operate a motor
vehicle within the City Limits of Cordova as prescribed by the City Ordinances of Cordova.

PLEASE PRINT

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Are you familiar with the Ordinances relating to traffic laws within the City of Cordova? YES NO

2. Do you have any illness or physical restrictions that would affect your ability to drive a motor vehicle? YES NO

3. Date of Birth: _____ Sex: F M
SSN: _____
Height: _____ Weight: _____ Hair: _____ Eyes: _____
Physical Address/Box #: _____
Phone #: _____ Home _____ Cell _____
Previous Driver's License State(s): _____
Previous Address: _____
Current Alaska Driver's License #: _____
Occupation: _____
Prospective Employer: _____

4. City Business License Number: _____

5. Proof of Insurance: YES NO

6. Vehicle Inspection Completed By _____ Date: _____

7. Vehicle to be used:
MAKE: _____ LICENSE PLATE: _____
MODEL: _____
VIN: _____

List all traffic offenses within seven years and list all criminal violations on Page 2 of this application.

I hereby agree that for good cause, my City Chauffeur's License may be cancelled by the City of Cordova in accordance with the City Ordinances.

Dated this _____ day of _____, 20____

APPLICANT SIGNATURE: _____

**CORDOVA DEPARTMENT OF PUBLIC SAFETY
CHAUFFEUR'S LICENSE
APPLICATION**

TRAFFIC OFFENSES (LAST 7 YEARS):

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____

CRIMINAL VIOLATIONS (ALL):

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____

OFFICIAL USE ONLY:

Alaska License Number: _____
City License Number: _____
Date License Issued: _____

CHECKED BY: _____

DATE: _____

APPROVED BY: _____

DATE: _____

Chief of Police or Officer

CITY OF CORDOVA COMMERCIAL VEHICLE INSPECTION SHEET

NAME OF CERTIFIED MECHANIC COMPLETING INSPECTION: _____

BUSINESS/EMPLOYER OF CERTIFIED MECHANIC: _____

DATE OF INSPECTION: _____

VEHICLE: _____

YEAR: _____

MAKE: _____

MILEAGE: _____

MODEL: _____

PLATE #: _____

1	BRAKES: PARKING & EMERGENCY
2	DOORS: OPEN & CLOSE PROPERLY
3	EXHAUST SYSTEM
4	FUEL: GAS, TANK, LEAKS
5	FRAME: CRACKED OR LOOSE, ACCESSORIES
6	HEATER, DEFROSTER, REAR WINDOW DEFOGGER
7	HORN
8	LICENSE PLATES: TWO W/CURRENT TABS PROPERLY AFFIXED
9	LIGHTS: HEADLIGHTS W/HIGH & LOW BEAMS, STOP OR BRAKE LIGHTS TURN SIGNALS, TAILLIGHTS, BACKUP LIGHTS, LICENSE PLATE LIGHTS
10	MIRRORS: LEFT SIDE (OUTSIDE) & EITHER INSIDE CENTER MIRROR OR RIGHT SIDE (OUTSIDE)
11	SEATBELT & CHILD RESTRAINT DEVICE: VEHICLE MADE AFTER 1/1/65 REQUIRES LAP BELT ONLY; VEHICLE MADE AFTER 1/1/68 REQUIRES LAP BELT & HARNESS
12	STEERING
13	SUSPENSION: LOOSE U-BOLTS, LOOSE SPRING HANGARS, BROKEN MAIN LEAF, BROKEN TORQUE ARMS, AXLE POSITION
14	TIRES: EXPOSED TIRE FABRIC, TIRE 2/32 TREAD, FLAT TIRE, SIDEWALL BUMP OR BULGE, INFLATION
15	VEHICLE REGISTRATION: CURRENT & IN THE VEHICLE
16	WHEELS: CRACKS OR REPAIRS, MISSING/LOOSE STUDS OR NUTS
17	WINDOWS: INTACT
18	WINDSHIELD/WIPERS: CRACKED WINDSHIELD, WIPERS

MISCELLANEOUS:

19	EMERGENCY EQUIPMENT: FIRE EXTINGUISHERS
20	UNSECURED ITEMS IN VEHICLE WHICH COULD SPILL, FALL OR INJURE DRIVER OR PASSENGERS DURING QUICK STOP
21	WARNING DEVICES: FLARES, FUSES, TRIANGLES

SIGNATURE OF CERTIFIED MECHANIC

SIGNATURE OF OWNER OF VEHICLE

"I CERTIFY THAT THE ABOVE VEHICLE WAS INSPECTED BY
ME & IS IN GOOD MECHANICAL CONDITION."

**STATE OF ALASKA
DEPARTMENT OF PUBLIC SAFETY
REQUEST FOR CRIMINAL JUSTICE INFORMATION
From the Alaska Criminal History Record Repository**

Original forms must be submitted to:
Criminal Records and Identification Bureau
5700 E. Tudor Road, Anchorage, AK 99507
Telephone: (907) 269-5767 Fax: (907) 269-5091
Include fee: \$20 single copy, \$5 each additional copy
Check or money order must be made payable to 'State of Alaska'

Type of information being requested (from the record subject): (Choose ONE)

1. Criminal Justice Information available **only to the SUBJECT**
- This report includes all criminal charges and dispositions, including any sealed record.
 - If the record subject has a sealed record this box **MUST** be checked
2. Criminal Justice Information available to **ANY PERSON for ANY PURPOSE**
- This report includes current/open criminal charges and charges that resulted in conviction, excluding sealed records.
3. Criminal Justice Information available to an **INTERESTED PERSON**
- This report includes all criminal charges and dispositions, excluding sealed records

A check or money order payable to the State of Alaska in the amount of \$20 must accompany this request. Additional copies, if requested at the time of this request, may be obtained for an additional \$5 per copy. State agencies with a Reimbursable Services Agreement (RSA) in place may fax the appropriate forms. All other requests must be submitted via U.S. Postal Service or in person.

Subject Name: _____

Maiden/Alias name(s): _____

Mailing Address: _____

City/State/Zip: _____

Alaska Drivers License #: _____

Date of Birth: _____ Sex: -Male Female Soc Sec No. _____

Telephone: _____ Msg: _____

MAILING ADDRESS TO SEND REPORT:

Name: _____

Title: _____

Mailing Address: _____

City/State/Zip: _____

If you would like the record faxed to you, provide a Fax Number: _____

Unsworn Falsification Statement (Your request will not be processed if you do not sign this statement.)
I certify under penalty of unsworn falsification (AS 11.56.210) that the information I am supplying on and with this form is true and correct.

Record Subject's Signature _____ Date _____

Criminal Records and Identification Bureau Use Only	
<input type="checkbox"/> Fee Payment Type _____	<input type="checkbox"/> Report Sent to Subject _____
<input type="checkbox"/> Fee Waiver/Authorization _____	<input type="checkbox"/> Report Sent to Requester _____
<input type="checkbox"/> OCA Number _____	<input type="checkbox"/> R&I Staff initials _____

Authority:

AS 11.56.210 - Unsworn Falsification

AS 12.62.160 – Release and Use of Criminal Justice Information; fees

AS 12.62.900 – Definitions

13 AAC 68 Article 4 – Dissemination of Criminal Justice Information

13 AAC 68.905 – Definitions

DPS Form 11/15/03

Revised 2/24/04

Revised 4/20/04

Revised 11/15/04

Revised 1/13/05

Revised 6/13/05