

## Radio Dispatch Service License Application Checklist

All documents must be submitted along with your application. Please contact Janet Ashley at 312-746-4300 to schedule an appointment to submit your application. The deadline for application submission is November 16th of the licensing year.

The following documents must be submitted with your application:

- \_\_\_ A fully executed and notarized Application for a Public Passenger Vehicle Radio Dispatch Service License;
- \_\_\_ Articles of Incorporation/Organization for the company; or proof of other ownership structure;
- \_\_\_ Corporate minutes/operating agreement indicating the selection of officers and percentage of ownership;
- \_\_\_ Certificate of good standing from the Secretary of State, Corporate Division, or a "Corporate File Detail Report" downloaded from the Secretary of State's Web site indicating a status of good standing;
- \_\_\_ Proof in the form of a lease or property tax record indicating the company's principal place of business in the City of Chicago;
- \_\_\_ A written description of the dispatch system, including a list of equipment, method of dispatch and hours of service, radio frequency, FCC license numbers etc;
- \_\_\_ A copy of a current radio dispatch service agreement between the radio dispatch company and all subscribers;
- \_\_\_ A list of all services provided by the radio dispatch company to subscribers that are not listed in the radio dispatch agreement;
- \_\_\_ Submission of all radio dispatch training materials including a copy of any training guide, test, manual or flyer;
- \_\_\_ Submission of radio dispatch plan including a description of the procedure for assigning radio dispatch calls to drivers;
- \_\_\_ A list of all current subscribers, including their City of Chicago license number(s), name , affiliation (if any), Chicago business address and telephone number and residence address;
- \_\_\_ Submission of "Indebtedness Affidavits" for all corporate officers, shareholders, members and owners;
- \_\_\_ Annual fee for a Radio Dispatch License is \$100.00. The fee must be paid by credit card, certified check or money order at the time the license application is approved.

**PLEASE KEEP A COPY OF ALL DOCUMENTS SUBMITTED TO THE DEPARTMENT**



**CITY OF CHICAGO**  
**DEPARTMENT OF CONSUMER SERVICES**  
**Public Vehicle Operations Division**  
**Public Passenger Vehicle Radio Dispatch Service License Application**

1. Type of Radio Dispatch Services provided (Check One): Taxi: \_\_\_\_\_ Livery: \_\_\_\_\_

2. Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Web site address: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_ - \_\_\_\_\_, ext. \_\_\_\_\_

Dispatch Number for Public Use: \_\_\_\_\_ - \_\_\_\_\_

Number of Available Lines for Public Calls: \_\_\_\_\_

Business Fax Number: \_\_\_\_\_ - \_\_\_\_\_

3. State of Illinois Corporate File #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Registered Agent Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

4. Complete the information below for **all** corporate officers/members, shareholders or owners. Use a separate sheet if needed.

**Full Name:** \_\_\_\_\_

Title(s): \_\_\_\_\_

Percentage of Ownership: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ ext. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Full Name:** \_\_\_\_\_

Title(s): \_\_\_\_\_

Percentage of Ownership: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ ext. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Full Name:** \_\_\_\_\_

Title(s): \_\_\_\_\_

Percentage of Ownership: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ ext. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Full Name:** \_\_\_\_\_

Title(s): \_\_\_\_\_

Percentage of Ownership: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Office Telephone: \_\_\_\_\_ ext. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

5. Attach a written description of the radio dispatch system to be used in the upcoming licensing year and a copy of the contract for service. Include reference to all equipment, method of dispatch, hours of service etc;

Name of Radio Dispatch Company: \_\_\_\_\_

FCC License Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Description of Equipment: \_\_\_\_\_



