



VILLAGE OF LAKE IN THE HILLS  
PUBLIC PASSENGER VEHICLE  
CHAUFFEUR'S LICENSE APPLICATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Business/Cell Phone #: \_\_\_\_\_  
Date of Birth \_\_\_\_\_ City/State of Birth \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State \_\_\_\_\_  
Driver's License Restrictions \_\_\_\_\_ Company You Drive For \_\_\_\_\_

Do you have a valid Illinois Drivers License? Yes  No \*

Are you licensed to drive in any other state? Yes \* No

Has your driver's license ever been suspended or revoked? Yes \* No

Have you ever used or been known by any other name? Yes \* No

Have you ever been convicted of a violation of Federal, State or Municipal Law? Yes \* No

\* Please provide additional information on a separate sheet of paper and attach it to this form.

EMPLOYMENT HISTORY  
LIST EMPLOYERS FOR THE PAST 5 YEARS

From: (Month/Year)	To: (Month/Year)	Employer & Complete Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that the above information provided is accurate and that I have read and will comply with **Chapter 36** of the Lake in the Hills Municipal Code.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name