VILLAGE OF LAKE IN THE HILLS
PUBLIC PASSENGER VEHICLE
VEHICLE LICENSE APPLICATION

Company/Business Name: ______________________________________________________

Business Address: ____________________________________________________________
City: ___________________________ State: _______ Zip Code: ______________
Business Phone #: _____________________________________________________________

Owner of Vehicle: ______________________________________________________________
Owner Address: ________________________________________________________________
City: ___________________________ State: _______ Zip Code: ______________
Owner Phone #: ________________________________________________________________

VEHICLE INFORMATION

Vehicle Identification Number (VIN) ___________________________ Color ______________
Make ___________________________ Model ___________________________ Year __________
Cab # ___________________________ License Plate # ___________________________ State __________

LEASED VEHICLE INFORMATION

If you lease any of the vehicles, complete the following:

Leased From: ________________________________________________________________
Business Address: ____________________________________________________________
City: ___________________________ State: _______ Zip Code: ______________
Business Phone #: _____________________________________________________________

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

_________________________________________