

**City of Fairview Park  
20777 Lorain Road  
Fairview Park OH 44126**

APPLICATION FOR SNOW PLOWING LICENSE

Full Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_/\_\_\_\_/\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone # \_\_\_\_\_  
Sex Female \_\_\_\_\_ Male \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**Have you ever been arrested for any crime other than minor traffic violations: (Detail location, nature offense, and penalty.)** Yes \_\_\_\_\_ No \_\_\_\_\_

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Have ever been denied a license or permit to snow plow? Yes \_\_\_\_\_ No \_\_\_\_\_

(If Yes, give details) \_\_\_\_\_

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Make of Vehicle \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Registration No. \_\_\_\_\_ Plate No. \_\_\_\_\_ State \_\_\_\_\_

Driver's License # \_\_\_\_\_ Insurance Company \_\_\_\_\_

Insurance Company Address \_\_\_\_\_

Agent Name \_\_\_\_\_ Telephone # \_\_\_\_\_

Company Represented \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of Local Supervisor \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

I swear that the above information is correct to the best of my knowledge.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature \_\_\_\_\_

***The certificate will be revoked if the bearer violates any provisions of 543 Codified Ordinance. Permit valid October 1, 2006 to May 1, 2007. License fee is \$25.00. Please provide copy of Driver's License and copy of proof of insurance.***