



563 Trabert Avenue, NW  
Atlanta, GA 30309

Dispatch: 404-351-1111  
Office: 404-351-8255  
Fax: 404-351-1937

**Checker Cab Company**  
**Vehicle Operator Application**  
ALL DRIVERS ARE INDEPENDENT CONTRACTORS

Driver # \_\_\_\_\_

Vehicle leased from:  
CCC DC H MBH ATL

Lease type: 12 hour 24 hour  
Lease date: \_\_\_\_\_

[www.atlantacheckercab.com](http://www.atlantacheckercab.com)

Please print or type the following information:

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last First Middle  
Month/Day/Year

Address \_\_\_\_\_ Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Single  
Street # Street Name Apt. #

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Home # Cell #

Length at current residence \_\_\_\_\_ Length lived in Metro Atlanta area \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birthplace \_\_\_\_\_  
County/State/Country

Type of driver's license: Regular Operator \_\_\_\_\_ Chauffeur \_\_\_\_\_ Public Passenger \_\_\_\_\_

State of issuance \_\_\_\_\_ Expiration date \_\_\_\_\_ License # \_\_\_\_\_

List traffic violations incurred in the past 3 years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Have you ever worked for Checker Cab? \_\_\_\_\_ If yes, give date(s): \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If yes, where? \_\_\_\_\_

Please provide the name, address, and phone number of two living relatives:

Name	Address	Phone #	Relationship

**Health Background**

Do you have any physical, mental, sensory handicapped, or alcohol/drug related behaviors that may impair your judgment or affect your ability to safely operate a vehicle? \_\_\_\_\_ If yes, explain. \_\_\_\_\_  
\_\_\_\_\_

