

MARYLAND PUBLIC SERVICE COMMISSION
Transportation Division
WILLIAM DONALD SCHAEFER TOWER
6 ST. PAUL STREET, 18th Floor
BALTIMORE, MD 21202-6806
TELEPHONE: 410-767-8128 OR 1-800-492-0474
FAX: 410-333-6088
Website: www.psc.state.md.us

PUBLIC SERVICE COMMISSION FOR-HIRE DRIVER'S LICENSE APPLICATION CHECKLIST

Please use this checklist as a guide when you prepare your application for submission to the Transportation Division.

- _____ I have completely answered all questions on the application paying special attention to the criminal conviction section and making sure to note all criminal convictions in any State during my lifetime.
- _____ I have signed the application (an original signature is required).
- _____ My application is signed (an original signature, not copied or rubber stamped, is required) by a representative of the Taxicab Association or the authorized For-Hire transportation company for which I will drive and includes the **name** of the Taxicab Association or the authorized For-Hire transportation company and their **PSC Carrier Number**.
- _____ I have at least six months consecutive driving experience in Maryland or at least one year consecutive driving experience in any State and have attached a current (issued within the last 30 days by the Department of Motor Vehicle in which I am currently licensed) **complete (full history)** driving record. A **36-month record is NOT acceptable**.
- _____ My address on the application matches the address on the driving record, or I have attached a current address correction card from the Department of Motor Vehicle issued on or after the date of my driving record.
- _____ I have attached a **complete, full history (Virginia is a personal use record)** driving record (issued by the Department of Motor Vehicle within the last 30 days) from **each State** that I have held a driver's license in during the past 10 years.
- _____ I have **attached a copy of my current State-issued driver's license and a copy of my Social Security Card**. I will bring my original driver's license and Social Security Card to the Transportation Division office when requested.
- _____ If I am not a U.S. citizen, I will bring my original **employment authorization from INS** to the Transportation Division office when requested and am **attaching a copy to the application**.
- _____ If I am a naturalized U.S. citizen (born outside the U.S.), I will bring my original **Certificate of Naturalization** or my **U.S. passport** to the Transportation Division office when requested and am **attaching a copy to the application**.
- _____ I have **attached the receipt from fingerprinting**. (Note: fingerprinting is to be completed {using **Livescan Fingerprint Form provided by Transportation Division**} at the Criminal Justice Information System (CJIS) located at 6776 Reisterstown Road in Baltimore. The cost for the FBI and State background check is \$51.25, cash and money orders are not accepted).
NOTE: If you believe information contained on your FBI criminal background report is incorrect and you wish to correct the record as it appears in the FBI's CJIS Division Record System, you must follow procedures set forth in Title 28, CFR, Section 16.30 through 16.34.
- _____ I have **signed and attached the PSC FILE COPY of the NonCriminal Justice Applicant's Privacy Rights document** and have retained the APPLICANT's COPY for my files.
- _____ I understand that I should retain a copy of all documents submitted to the Transportation Division for my records. The Transportation Division walk-in office hours are Monday through Thursday from 9 AM to 12 Noon and 1 PM to 4 PM.

NO COPIES WILL BE MADE AT THE PSC TRANSPORTATION DIVISION OFFICE.

INCOMPLETE APPLICATIONS (WHICH INCLUDES ITEMS LISTED ABOVE MISSING FROM SUBMISSION) WILL BE RETURNED WITHOUT BEING REVIEWED OR PROCESSED.

MARYLAND PUBLIC SERVICE COMMISSION APPLICATION FOR A FOR-HIRE DRIVER'S LICENSE

PASSENGER-FOR-HIRE TAXICAB: BALTIMORE CITY CHARLES COUNTY CUMBERLAND HAGERSTOWN

Do Not Write In This Block	
Approved _____ Denied _____	By _____ Date _____ Sup. Review _____ Date _____
Temporary License No. _____	Date Issued _____ By _____
Three-year License No. _____	Date Issued _____ By _____
Date Photographed _____	By _____ I received a copy of the Commission's statute and/or regulations _____

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OR PROCESSED.**

Name: _____
(Last) (First) (Middle) (Maiden)

Prior Name (if applicable): _____ Reason for name change: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____ Telephone No.: _____

Date of Birth: _____ Country of Birth: _____ City of Birth: _____

Social Security No. (Required under Family Law Article §10-119.3 of MD Annotated Code): _____

Hair Color: _____ Eye Color: _____ Email Address: _____

U.S. Citizen? Yes ___ No ___ If not, Alien # issued by U.S. Immigration & Naturalization Service: A- _____

If not U.S. citizen, check current status: Permanent Resident Employment Authorized Expiration Date: _____

Current Driver's License: State: _____ Class: _____ No.: _____ Expiration Date: _____

Have you ever held a driver's license in another state? Yes ___ No ___ If yes, when and where? _____

Has your State issued MVA Driver's License ever been suspended or revoked? Yes ___ No ___

Have you ever held a Taxicab or Passenger For-Hire Driver's License? Yes ___ No ___ If yes, when and where? _____

Has your Taxicab or Passenger-For-Hire Driver's License ever been suspended or revoked? Yes ___ No ___

Are you a taxicab permit holder? Yes ___ No ___ Are you a PSC-authorized passenger carrier? Yes ___ No ___

1. Have you **ever** been convicted of **ANY** criminal violations of law, in **any** state? Yes ___ No ___
2. Have you **ever** been convicted of **ANY** alcohol or drug related traffic violations of law, in **any** state? Yes ___ No ___
3. Have you **ever** been convicted of **ANY** traffic violations of law, in **any** state? Yes ___ No ___

If you answered "yes" to any of the above questions, list the date(s), place(s), charge(s), and sentence/penalty for each case/conviction (use back of application if additional space is needed). _____

Note: For purposes of the above questions, "convicted" means that you were charged with an offense and as a result a **civil or criminal penalty was imposed, including (but not limited to): jail sentence (even if suspended), time served, house arrest, probation, probation before judgment, fine, restitution, community service, mandated substance abuse treatment program, etc.**

The Maryland Public Service Commission requires for-hire drivers under its authority to adhere to the Commission's statute and regulations. (See Title 10 of the Public Utilities Article, Annotated Code of Maryland, and, for taxicab drivers, Title 20, Subtitle 90.01 of the Code of Maryland Regulations.) The statute and regulations are available on the Commission's website at <http://www.psc.state.md.us>.

I hereby authorize the Public Service Commission to investigate, at any time, my driving record, criminal and medical background and immigration status. This investigation may involve any appropriate government agency or private institution.
I understand that I may be required to appear for a personal interview at the time of application or at any time during the licensing period.
I understand that suspension or revocation of my driver's license, subsequent criminal convictions, or expiration of employment authorization from the Immigration and Naturalization Service may result in immediate suspension or revocation of my For-Hire Driver's License.
I hereby agree to notify the Public Service Commission of any change in information contained in this application within 72 hours.
I hereby agree to comply with all city, state and federal ordinances and statutes and the regulations of the Public Service Commission.
I hereby certify that the statements made in this application are true, correct, and complete.
I hereby certify that, if I am applying for a Baltimore City taxicab driver's license, I have successfully completed or intend to successfully complete a course in courtesy, geography, map reading and tourist information, as required by PUA 10-104(d) of the Maryland Annotated Code. I understand that my failure to complete this course will result in denial of a Baltimore City taxicab driver's license.

I, the undersigned, hereby certify, under penalty of perjury, that I have read and fully comprehend this form in its entirety and that the information provided is true and complete to the best of my knowledge and belief.

APPLICANT'S SIGNATURE: _____ **Date:** _____

Taxicab Association: _____ Signature of Association Official: _____
For-Hire Carrier & PSC No.: _____ Signature of Company Official: _____

NOTE: FALSIFICATION OF THIS APPLICATION MAY RESULT IN DENIAL, SUSPENSION OR REVOCATION OF LICENSE

FINGERPRINTING SERVICES
CRIMINAL JUSTICE INFORMATION SYSTEM (CJIS)

Location: 6776 Reisterstown Road (West side of Reisterstown Road Plaza Mall)
Suite 102 (first floor), Baltimore, MD 21215
For directions, go to <http://www.mapquest.com>

Phone: 410-764-4501 OR 1-888-795-0011 (toll free)

Hours of Operation: Monday-Friday 8:30am-5:00pm (Please check website or call to verify current times)
Closed on designated State holidays.

The following locations are available by appointment only:

Call for an appointment: 410-764-4501 or 1-888-795-0011 (toll free)

Motor Vehicle Administration – Bel Air
501 West MacPhail Road
Bel Air, MD 21014

Motor Vehicle Administration - Frederick
1601 Bowman's Farm Road
Frederick, MD 21701

Motor Vehicle Administration - Salisbury
251 Tilghman Road
Salisbury, MD 21801

Motor Vehicle Administration - Glen Burnie
6601 Ritchie Hwy, N.E.
Glen Burnie, MD 21062

Motor Vehicle Administration – Waldorf
St. Charles Business Park
11 Industrial Park Drive
Waldorf, MD 20602

For additional information on fingerprint services available from Government Operated Services and Private Providers and a list of currently authorized Private Providers, go to:
<http://www.dpscs.state.md.us/publicservs/fingerprint.shtml>

**Instructions For Completing LiveScan Pre-Registration Application for
FBI and Maryland State Criminal History Record Checks**

(Type or Print in Black Ink)

The Livescan Pre-registration Form is now used to obtain the required State and FBI criminal history record checks. **NEXT PAGE IS USED AS THE 'FINGERPRINT CARD' – no other card(s) will be given to you. Please follow these instructions:**

1. **Complete only the Applicant Information** section of the form. All information in that section must be provided.

Name – type or print the applicant's name.

Date of Birth - Enter the applicant's date of birth. Example: Enter May 27, 1969 as 05/27/1969.

Social Security Number - Enter the applicant's Social Security Number.

Gender – Check Male or Female.

Height - Enter applicant's height in feet and inches. Do not use fractions of an inch.

Weight - Enter applicant's weight in pounds. Do not use fractions of a pound.

Eye Color - Enter the color of the applicant's eyes.

Hair Color - Enter the color of the applicant's hair.

Race - Indicate race by checking one of the boxes on the form.

Place of Birth - Enter the state in which the applicant was born. If not born in the United States, enter the name of the country in which the applicant was born.

Citizenship - Enter the applicant's country of citizenship.

Current address – Enter complete current street address.

City: Enter city in which you reside.

State: Enter state in which you reside.

Zip Code: Enter zip code in which you reside.

Daytime Phone: Enter daytime phone number.

Evening phone – Enter evening phone number.

Driver's License # - Enter driver's license number from your State driver's license.

DO NOT ENTER ANY INFORMATION BEYOND THE APPLICANT INFORMATION SECTION.

2. **Double-check the livescan form** to make sure you have completed the Applicant Information section only.
3. **Take the attached livescan form** to the Criminal Justice Information System (CJIS) at the Reisterstown Road Plaza Office Complex, 6776 Reisterstown Road, Suite 102, Baltimore, MD 21215 OR to one of the authorized fingerprinting services listed on the previous page entitled "Fingerprinting Services" OR to one of the authorized Private Providers listed on the Department of Public Safety & Correctional Services' website at <http://www.dpscs.state.md.us/publicservs/fingerprint.shtml>. For help, call CJIS at 410-764-4501.
4. **Government Issued Photo Identification must be presented** at the time of fingerprinting. (Examples: driver's license, Certificate of Naturalization, passport, Alien Registration Card, or Military Identification)
5. **Payment** –
 - **CJIS** - Credit card or check made payable to CJIS - Central Repository. **Cost: \$51.25** (\$31.25 for FBI & State background check plus \$20 for fingerprinting fee).
 - **Government Operated Services and Private Providers** – **Cost: \$31.25** for FBI & State background check **plus the fingerprinting fee charged by the Government Operated Service or Private Provider.** Contact the Government Operated Service or Private Provider directly regarding fees charged for fingerprinting, accepted forms of payment and hours of operation.
6. **You must receive a receipt** from CJIS, the MVA locations or Government Operated Services listed on the previous page, or the authorized Private Provider listed on the website above, **when you are fingerprinted. Submit this receipt to the Transportation Division with your application packet and make a copy for your records.**

Livescan Fingerprint Form
for background check



Livescan Fingerprint Form
for background check

STATE OF MARYLAND
DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES
CRIMINAL JUSTICE INFORMATION SYSTEM - CENTRAL REPOSITORY

LIVESCAN PRE-REGISTRATION APPLICATION

Applicant Information (Please TYPE OR PRINT CLEARLY)

Name:			
Date of Birth:	SSN:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female (Please check)	
Height: ft. inches	Weight: lbs.	Eye Color:	Hair Color:
Race: <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American <input type="checkbox"/> Other (Please check)			
Place of Birth:		Citizenship:	
Current address:			
City:		State:	ZIP Code: -
Daytime Phone:	Evening Phone:	Driver's License #:	

AGENCY INFORMATION

Agency Authorization #: 9000037631 (State & FBI Background Check)	
ORI # (if required): MD920470Z	Reason fingerprinted? Taxicab/PFH Driver's Licensure
Position Applied for: MD Public Service Commission Taxicab / For-Hire Driver's License	

Request Type: (Choose one ONLY)	
<input type="checkbox"/> Adult Dependent Care	<input checked="" type="checkbox"/> Government Licensing or Certification
<input type="checkbox"/> Attorney/Client	<input type="checkbox"/> Immigration/VISA
<input type="checkbox"/> Child Care	<input type="checkbox"/> Individual Challenge
<input type="checkbox"/> Criminal Justice	<input type="checkbox"/> Individual Review
<input type="checkbox"/> Gold Seal/ Adoption	<input type="checkbox"/> MSP Licensing
<input type="checkbox"/> Gold Seal/Letter/VISA	<input type="checkbox"/> Private Party Petition
<input type="checkbox"/> Government Employment	<input type="checkbox"/> Public Housing

Mail Response to:
(Mailing option only available for Visa Gold Seal and/or Individual Review)

Name: MARYLAND PUBLIC SERVICE COMMISSION

Address: 6 ST. PAUL STREET, 18TH FLOOR

City, State, Zip Code: BALTIMORE, MD 21202

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

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***I hereby verify, by my signature below, I have been given a copy of the Applicant's Privacy Rights.**

Print Name

Signature

Date

Updated 11/6/2019