



STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
**TAXICAB AUTHORITY**  
2090 E. Flamingo Road, Suite 200  
Las Vegas Nevada 89119  
Telephone (702)668-4000 • Fax (702)668-4001  
<http://taxi.nv.gov>

**TEMPORARY TAXICAB MODIFICATION OF COLOR SCHEME OR INSIGNIA SUBMISSION FORM**

Date Submitted: \_\_\_\_\_

Taxicab Company Submitting Request: \_\_\_\_\_

Description of Temporary Request: \_\_\_\_\_

Deviation For: \_\_\_\_\_

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

(Subject to Taxicab Authority Administrator or Designee Final Approval)

Total number of medallions (Excluding special events medallions): \_\_\_\_\_

Number of taxicabs to be wrapped: \_\_\_\_\_

Taxicab numbers to be wrapped: \_\_\_\_\_

Attachments:

- Three (3) color copies of artwork.
- Copy of Taxicab Company lease agreement related to temporary modifications.
- Description of procedure and materials to be used.

Authorized personnel submitting application:

The undersigned duly authorized representative certifies that all statutes (NRS) and Regulations (NAC) have been met relative to the vehicles addressed in this application.

Submitted by: \_\_\_\_\_  
Signature of Company Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_  
Taxicab Authority Vehicle Inspector Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Final Approval: \_\_\_\_\_  
Taxicab Administrator or designee Final approval \_\_\_\_\_ Date \_\_\_\_\_

STATE OF NEVADA  
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**TAXICAB AUTHORITY**  
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Las Vegas Nevada 89104  
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<http://taxi.state.nv.us>

**WRAPPED CAB CONTRACT COMPLETION DATES**

<b>TAXICAB COMPANY</b>	<b>Wrap Installer</b>	<b>Car Number</b>	<b>Start Date</b>	<b>End Date</b>