STATE OF	_)
)
COUNTY OF	_)
application and know the contents thereof; the contain a full and true account of the information knowledge that misrepresentation or failure to cause for denial or revocation of a Certificate application with full knowledge that Nevada false oath in any matter before the Taxicab A	at the statements contained herein are true and correct and ation requested; that I executed this statement with the o reveal information requested may be deemed sufficient of Public Convenience; that I am voluntarily submitting this Revised Statutes 463.140(s) provides "any person making authority Board shall be guilty of perjury."; and, further, that I fe the Nevado State Taxicah Authority as amended, and the
•	If the Nevada State Taxicab Authority, as amended, and the thority, as promulgated hereunder and agree, if licensed, to
their agents from any and all manner of action	discharge the State of Nevada Taxicab Authority Board and n and causes of action whatsoever which I, Nevada, the State cab Authority Board and their agents, as a result of my ce in the State of Nevada.
	X Signature of Applicant
SUBSCRIBED AND SWORN TO, BEFORE ME	
THIS DAY OF,	,
Notary Public in and for said county and state	