



2012 Taxi Appeals Board Application

Submitted by:

Applicant name: _____

Applicant address: _____

City, State, Zip Code: _____

Date: _____



memo

To: Taxi Appeals Board Applicants
From: Sean Brandon
CC: Rochelle Small-Toney, Stephanie Cutter, Cynthia Pelote
Date: April 02, 2012
Re: Taxi Appeals Board 2012

Thank you for your interest in the taxi appeals board which serves as the governing body that hears cases, approves and denies appeals, or upholds decisions by the City of Savannah. The appeals board represents the City of Savannah, the hospitality industry, citizens of Savannah, and the taxi industry. You are applying for membership to the appeals board to represent the taxi industry.

Applicants should be mindful that the appeals board is a non-biased board that makes decisions solely in fairness. Applicant's general objective for the purpose of the appeal board should be to serve as the taxi industry voice in relationship to the cases being presented.

The City of Savannah Mobility and Parking Services department looks forward to receiving the application and working with whoever is selected be on the taxi appeals board for the remainder of the year.

With regards,

A handwritten signature in black ink that reads "Sean Brandon". The signature is written in a cursive, flowing style.

Sean Brandon, Director
Mobility and Parking Services
City of Savannah



Non-Discrimination Clause

The City of Savannah prohibits discrimination in all of its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex (including gender identity and expression), marital status, familial status, parental status, religion, sexual orientation, political beliefs, genetic information, reprisal, or because all or part of an individual's income is derived from any public assistance program.



Taxi Appeals Board Application Information Sheet

2012 Application

Applicant: _____
Last Name First Name Middle Initial

Address: _____
City State Zip

Telephone: (____) _____ - (____) _____ - _____

Taxi Business Affiliation: _____

Address: _____
City State Zip

Cellular Phone: (____) _____ - _____

E-mail Address: _____ @ _____



Taxi Appeals Board Notification Sheet

2012 Taxi Appeals Board Application Response

Dear Applicant,

Thank you for your interest in serving as a member of the Taxi Appeals Board. Your application has been processed and the following decision has been made. Please see below.

_____ Approved

_____ Disapproved