



**CITY OF SARATOGA SPRINGS**  
**PROCEDURES FOR EQUINE-DRAWN CARRIAGE DRIVER LICENSE**

1. Applicant must complete driver's application and receive copy of ordinance. (Applicant must be at least 18 years of age.)
2. Applications may be submitted by mail
3. The applicant must supply the following information:
  - A. 3 recent unretouched photographs – 2" x 2" (WHEN TAKING PHOTOGRAPHS YOU MAY NOT WEAR A HAT OR SUNGLASSES.)
  - B. Abstract of applicant's driving record, obtained by the applicant from the Department of Motor Vehicles.
  - C. A copy of the applicant's valid NYS motor vehicle driver's license.
  - D. A sworn affidavit from the applicant that the applicant is competent to safely drive an equine-drawn carriage, has knowledge and experience in driving such carriages and has knowledge of proper equine grooming, care, nutrition and equipment.
4. Application must be signed before a Notary or Commissioner of Deeds
5. In addition to the above:
  - A. Payment of \$10.00 to City of Saratoga Springs for first time license.
  - B. Payment of \$35.00 to City of Saratoga Springs for renewal of license.

**FOR COST OF FINGERPRINTING:**

**\$100.00 MONEY ORDER ONLY-Payable to Commissioner of Finance**  
(Please note: If renewal and current license expired within the last ninety (90) days, fingerprinting will not be required).

6. Once your application has been completed, take two copies to the City Police Department along with the above noted fees for fingerprinting.
7. Make an appointment for the fingerprinting with the City Police Department. It will take about one week to get an appointment. The number is: **584-1800**



**CITY OF SARATOGA SPRINGS**  
**APPLICATION FOR EQUINE - DRAWN CARRIAGE DRIVER LICENSE**

1. Full name \_\_\_\_\_

List any other names you have used in the past \_\_\_\_\_

List any name under which you have been granted a driver's license, if the name differs from the one you are now using \_\_\_\_\_

2. Street address \_\_\_\_\_ City \_\_\_\_\_

3. Phone # \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

4. Color of eyes \_\_\_\_\_ Color of hair \_\_\_\_\_

5. Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_

6. DMV License# \_\_\_\_\_ Class \_\_\_\_\_ Exp. Date \_\_\_\_\_

A copy of New York State driving record attached?  YES  NO

7. Social Security # \_\_\_\_\_

8. Citizen of U.S.?  YES  NO

9. List previous employment \_\_\_\_\_

\_\_\_\_\_

10. List previous experience in operating equine drawn carriage

Company Name \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Date of employment: \_\_\_\_\_

11. Are you of sound mind and body and not subject to epilepsy, vertigo, heart disease or any other infirmity of mind or body which might render you incapable or unfit to safely operate a motor vehicle?  YES  NO

If no, give particulars \_\_\_\_\_

12. A. Are you able to read and write the English language?  YES  NO

B. Are you addicted to the use of intoxicating liquor?  YES  NO

C. Do you unlawfully use any drug or controlled substance?  YES  NO

13. Have you ever been convicted of a felony or misdemeanor?  YES  NO

If yes, give the following information:

State \_\_\_\_\_ City \_\_\_\_\_ Date \_\_\_\_\_

Original Charge \_\_\_\_\_

If convicted of a misdemeanor, you are required to produce a certificate of disposition.

If convicted of a class A misdemeanor or felony, you are required to state:

Facts of original charge \_\_\_\_\_  
\_\_\_\_\_

**YOU MUST ALSO PRODUCE ONE OF THE FOLLOWING:**

1. Certificate of release of disposition
2. Certificate of good conduct from parole board
3. Executive pardon from office of sentencing judge

14. Do you hold any business, professional or trade license?  YES  NO

If yes, what type of license do you hold? \_\_\_\_\_

15. Have you ever been summoned to court?  YES  NO

If yes, what court? \_\_\_\_\_

What was the charge? \_\_\_\_\_

16. Have you ever been previously licensed as an equine-drawn carriage driver?  YES  NO

If yes, where were you licensed? \_\_\_\_\_

If yes, has your equine-drawn carriage driver's license ever been revoked?  YES  NO

If yes, for what cause? \_\_\_\_\_

\_\_\_\_\_  
Signature of applicant

**NOTE: THE SARATOGA SPRINGS POLICE DEPARTMENT WILL CONDUCT AN INVESTIGATION OF YOUR BACKGROUND, INCLUDING A FINGERPRINT SEARCH**



THROUGH THE DIVISION OF CRIMINAL JUSTICE SERVICES. IF IT IS DETERMINED THAT YOU HAVE GIVEN FALSE OR MISLEADING INFORMATION ON THIS APPLICATION, ANY LICENSE ISSUED TO YOU WILL BE SUBJECT TO IMMEDIATE REVOCATION.

I, \_\_\_\_\_, being duly sworn deposes and says:

1. I am the person who completed this application and I have signed it.
2. I understand that I am under oath and I swear that all the information contained in the application is true.
3. I understand that any false information given by me in the application would be perjury and I know that perjury is a crime.

\_\_\_\_\_  
Signature of applicant

Subscribed and sworn to on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_  
before me.

\_\_\_\_\_  
Notary Public or Commissioner of Deeds

IF THIS APPLICATION IS FOR RENEWAL OF YOUR EQUINE- DRIVER'S LICENSE, PLEASE BE ADVISED THAT FINGERPRINTING WILL NOT BE REQUIRED. IF YOUR LICENSE HAS EXPIRED FOR A PERIOD OF 90 DAYS OR MORE, A NEW SET OF FINGERPRINTS WILL BE REQUIRED.



**AFFIDAVIT OF DRIVER**  
**OF EQUINE-DRAWN CARRIAGE**  
**[CITY CODE SECTION 200-6(7)]**

I, \_\_\_\_\_, being duly sworn, depose and state:

1. I am making application for a license to drive an equine-drawn carriage in the City of Saratoga Springs. I have read chapter 200 of the Saratoga Springs City Code.
2. I have approximately \_\_\_\_ years experience in driving equine-drawn carriages. I am competent to drive such carriages and I have good and sufficient knowledge of proper equine grooming, care, nutrition and equipment.

\_\_\_\_\_  
Signature of Driver

STATE OF NEW YORK    )  
  )    ss.:  
COUNTY OF SARATOGA )

On the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_, before me, the undersigned, a Notary Public/Commissioner of Deeds in and for said State, personally appeared \_\_\_\_\_ personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or persons upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public/Commissioner of Deeds