

Horse Drawn Cab Driver -**Character and Fitness Certification**

I certify to the following:

- I do not suffer from any condition or illness that would prevent me from safely operating a horse drawn cab.
- I have mastered the proper care, handling, and driving of carriage horses.
- I know the geography of Central Park and its entrance and exit routes.
- I know the applicable Department of Consumer and Worker Protection (DCWP), NYC Department of Health and Mental Hygiene, and traffic laws, rules, and regulations.

	out the table below.	□ Yes	□ NO
	illerise related to cruelly of	⊔ Yes	□ NO
isted of a prime or a	ffence related to cruelty or		□ No
		or	□ No
	e under the influenc	ricted of reckless driving or operating a vehicle e under the influence of intoxicants or drugs?	icted of reckless driving or operating a vehicle or e under the influence of intoxicants or drugs?

(Include details)	

- I understand that if I do not fully complete this Certification, DCWP may deny my license application.
- I have reviewed the entire Certification. To the best of my knowledge, this Certification is true and accurate.
- I understand that falsification of any statement made herein is an offense punishable by a fine or imprisonment or both.

Signature	 Date	
Print Name		