



CITY OF SANTA BARBARA

PEDICAB OPERATOR PERMIT APPLICATION CHECKLIST

Applicant: Copy this page for your records. Follow the steps below in order.

Name: _____ **Phone:** _____

STEP 1: Submit **PAYMENT to City Hall, Finance Department: 735 Anacapa St.**
Total application fee: \$57 (includes \$32 for DOJ, and \$25 for Business License).
Upon payment, you will be given "Request for Live Scan" forms.

| |
|------------------------------|
| CITY FINANCE PAID STAMP here |
| \$32 DOJ fee |
| \$25 Business License fee |

STEP 2: Make a Live Scan fingerprint appointment:

1. Call the Santa Barbara Police Department – Records: (805) 897-2355 to schedule the Live Scan.
2. Arrive at the Santa Barbara Police Department (215 E. Figueroa St) at least 10 minutes prior to the appointment. Bring the receipts and forms given to you by the Finance Dept.
3. A \$25 Roll Fee is due and payable at the time of the appointment.
4. Once you have been fingerprinted you will receive a copy of the completed Live Scan form.

STEP 3: Following your Live Scan appointment, submit the completed Pedicab Operator Permit packet to the Police Technician at 215 E. Figueroa St.

The packet should include all of the following, signed and completed:

- Grounds for Denial form
- Applicant Information form
- Arrest History
- Authorization to Release Information (on same page as Arrest History)
- Intent to Hire
- 2 Passport Photos
- Live Scan form completed by Live Scan technician.

You will be contacted by the Police Technician's office when the permit is ready.

If you have any questions, you may contact the Police Technician at (805) 897-2333 or permits@sbgpd.com.

| |
|--|
| Police Dept I.D. # |
| Exp: |
| Finance File # |
| <input type="checkbox"/> DOJ DELAY: _____ |
| <input type="checkbox"/> DOJ <input type="checkbox"/> VDX <input type="checkbox"/> GUS |
| Date Rec'd by Police Tech: |
| <input type="checkbox"/> Mailed/Picked Up Date: _____ |
| <input type="checkbox"/> Copy sent to Finance Date: _____ |

| |
|---|
| FOR OFFICE USE ONLY |
| Police Technician's recommendation: _____ Initials: _____ Date: _____ |
| POLICE CHIEF or DESIGNEE: Application is <input type="checkbox"/> Approved <input type="checkbox"/> Denied |
| Signature: _____ Title: _____ Date: _____ |



CITY OF SANTA BARBARA

Grounds for Denial—Pedicab Operator Permit

Notice to Applicant:

Please read the Grounds for Denial and sign this acknowledgement before you complete the application. Complete language of Grounds for Denial can be found in Santa Barbara Municipal Code § 5.28.080.

Grounds for Denial (condensed):

1. Making false statements on the application.
2. Does not possess a valid driver's license.
3. You have any driving restrictions issued by the State of California.
4. You are required to register pursuant to Section 290 of the California Penal Code.
5. You have been convicted of a crime of moral turpitude or narcotics.
6. You have been convicted within the last three (3) years of driving a vehicle while under the influence of intoxicating liquor or drugs.
7. You fail to comply with the requirements of SBMC Chapter 5.28.

NO REFUNDS - Should you be denied for any reason, should you choose to withdraw the application at any time in the process, or should you fail to submit any/all required information, you will not be refunded any of the fees paid. Once payment is made, there will be no refunds for any reason.

Signature below acknowledges the applicant has read, understands, and agrees to the information and terms herein.

Signature

Date



CITY OF SANTA BARBARA

APPLICATION FOR PEDICAB OPERATOR'S PERMIT

Applicant Information

(Pursuant to Santa Barbara Municipal Code, Chapter 5..28)

SBPD Permit #:

EXP:

Finance Dept B/L:

Office Use: (Photo)

| | | | |
|---|------------------|-------------------------------|----------------|
| Date of Application: | | | |
| Name: | | | |
| Other Names Used (list "also known as" names): | | | |
| Residence Address (include street, city, and zip code): | | | |
| Mailing Address, if different (include street, city, and zip code): | | | |
| Phone Number: | | | |
| Are you a U.S. citizen? | | Social Security No: | |
| Date of Birth: | | Place of Birth: | |
| Height: ft in | Weight: lbs | Color of Eyes: | Color of Hair: |
| Length of time in Santa Barbara: | | Length of time in California: | |

| | | | |
|--|---------------|-------------------------|---------------------|
| Driver's License # (Include a photocopy of front and back of license.) | State: | Expiration Date: | Date Issued: |
| List all Driver's Licenses previously held in other states: | | | |

List residences for the past five years. Start with the most recent. List address and dates at each.

- _____ from _____ to _____
- _____ from _____ to _____
- _____ from _____ to _____
- _____ from _____ to _____

List your last three places of employment. Start with your current or most recent employer.

- _____ from _____ to _____
- _____ from _____ to _____
- _____ from _____ to _____

Signature below indicates the applicant understands that if any information requested on this form is misrepresented or incomplete, it may be grounds for denial of this permit application.

Applicant's Signature

Date

ARREST HISTORY

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

Failure to **list all arrests and citations** may result in a denial of your application. This page **MUST** be completed. If there is no arrest history, write "NONE" or "N/A".

| Date | Place (City and State) | Reason (Violation) |
|------|------------------------|--------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

Are you currently on:

| | | |
|--|--|----------|
| On probation? | <input type="checkbox"/> No <input type="checkbox"/> Yes | Charges: |
| On parole? | <input type="checkbox"/> No <input type="checkbox"/> Yes | Charges: |
| Required to register pursuant to Penal Code section 290 (sex registrant)? <input type="checkbox"/> No <input type="checkbox"/> Yes | | |

Signature below indicates the applicant understands that if any information requested on this form is misrepresented, it may be grounds for denial of this permit application.

Signature (*Permit Applicant*)

Date

The Police Technician verbally verified with applicant that:

applicant's answer is "none" OR applicant listed complete/entire arrest history

Police Technician Initials _____ Date: _____

AUTHORIZATION TO RELEASE INFORMATION TO THE CITY OF SANTA BARBARA, POLICE DEPARTMENT

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

As an applicant for a City permit within the City of Santa Barbara, I hereby authorize the release of any and all information that you may have concerning my work records education records, medical records, and information of a confidential or privileged nature to the City of Santa Barbara Police Department and its agents.

I hereby release you, your organization, or others, from any liability or damage, which may result from furnishing the information requested.

Printed (*Permit Applicant's Name*)

Signature (*Permit Applicant*)

Date

CITY OF SANTA BARBARA

NOTICE OF INTENT TO HIRE PEDICAB DRIVER PERMIT (Pursuant to Santa Barbara Municipal Code, Chapter 5.28)

Notice of Intent to Hire:

_____ intends to employ
(Name of pedicab company)

_____ as a pedicab driver.
(Name of driver)

I, _____, have verified that the individual named
(Name of company owner or authorized agent)

above is a legal resident and entitled to work in the United States.

IMPORTANT: Driver may NOT drive until:

- driver has been issued a City permit to operate a pedicab.
- operator and driver have discussed the rules and regulations set forth in MC Section 5.28-Pedicab Ordinance.

By signing below, you acknowledge these terms.

Signature

Title (specify owner or agent*)

Date

**The owner of the company or an authorized agent must sign this form. An authorized agent has permission to act for the owner and has a copy of this permission on file with the Police Department.*