



CITY OF SANTA BARBARA

PARATRANSIT SERVICE APPLICANT CHECKLIST OWNER'S PERMIT

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

Applicant: Make a copy of this page for your reference.

Proposed Taxi Company Name: _____

Contact Name: _____ **Phone:** _____

Did you purchase/take ownership of this company from a previous owner? ☐ yes* ☐ no

PHASE 1 – Present the following items to the Police Technician at 215 E. Figueroa St:

TO BE SIGNED BY ALL OWNERS:

- ☐ Owner/Business Information Sheet
- ☐ Authorization to Release Information & Hold Harmless Agreement
- ☐ Terms of Permit Sheet
- ☐ Responsibilities of Taxicab Company Owners Sheet

TO BE COMPLETED BY EACH OWNER:

- ☐ Personal Information Sheet (2 pages)
- ☐ Arrest History Section, signed
- ☐ Applicant Acknowledgement initialed and signed by each owner
- ☐ Submit two color passport-sized photographs for each owner

ADDITIONAL ITEMS TO BE SUBMITTED WITH APPLICATION:

- ☐ Proposed color scheme and logo, which must be “unique and easily distinguishable” from other taxi companies. [SBMC 5.293025 (P)]
 - ☐ Passenger log (manifest) – printed with company name, address, and phone number (refer to sample)
 - ☐ Sample rate card, printed with all rates to be charged. If company will have more than one rate, the reason for each rate must be listed (rates may not be based on the number of passengers in a vehicle).
 - ☐ Letter of approval from property owner/manager of address where all vehicles will be stored, authorizing storage.
 - ☐ * If the company previously belonged to another owner, you must include a letter from the former owner authorizing the use of the company's previously-approved name, colors, and logo.
- ☐ **\$520 application fee**, plus \$40 for each person requiring a background check.

PHASE 2 – After application has been processed, the following must be presented and approved prior to operation:

- ☐ Proof that you have applied for a Business License with the City of Santa Barbara Finance Department.
- ☐ Vehicle Inspection Report completed by a certified mechanic for each vehicle in the fleet.
- ☐ Department of Motor Vehicles registration form for each vehicle, showing each vehicle is registered as a taxicab.
- ☐ A certificate of accuracy from the County Department of Weights and Measures.
- ☐ Proof of General Liability and Automobile Liability insurance in the minimum amounts specified by the City. Proof must include a list of all drivers and vehicles insured by the company. (Proof of insurance must be emailed directly from the insurance representative to the Police Technician at permits@sbpd.com prior to the owner's visit.)
- ☐ The vehicles, equipped with a working top light and meter, painted exactly as approved. All required equipment must also be in the vehicles at the time of initial inspection, including but not limited to:
 - posted rate card
 - first aid kit
 - triangles or flares and
 - map or GPS system
 - flashlight
 - secured fire extinguisher

Date Submitted:

Application Fee Paid - \$520

Inspection Date:

Date Company Approved:

SBPD OWNER'S PERMIT #:



CITY OF SANTA BARBARA

PARATRANSIT OWNER APPLICATION OWNER/BUSINESS INFORMATION

SBPD Permit #:

Finance Dept B/L:

Proposed name of new taxicab company (do not use "Santa Barbara" as part of the name):	
Full names of all owners: 1.	2.
3.	4.
Business mailing address:	
Business phone:	Owner's personal phone:
Address(es) where vehicles will be garaged when not in use (cars may NOT be stored on public streets):	
Address of administrative (office) facilities:	
What type of communication system between taxis and dispatcher will be used:	
Hours of operation:	Type of services to be offered by company:
Has the applicant or any person with an ownership interest ever had a permit denied, suspended or revoked? <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, explain:	

VEHICLE LIST: List all vehicles to be placed into the fleet at the start of operations

	Make	Model	Year	VIN	Meter Type/Model
1					
2					
3					
4					
5					

You must also submit a Personal Information Sheet, Arrest History, Authorization to Release Information, and two passport-size color photos for each individual named on this application. If the applicant is a corporation, a copy of the Articles of Incorporation and a list of all officers, directors and stockholders owning or controlling 10% or more of the stock, percentage of ownership, the name, address and phone number of the Agent for Service and a sworn, financial statement is required.

I certify under the penalty of perjury that this statement and all attachments are, to the best of my knowledge, true, correct and complete.

Signature – Owner 1

Signature – Owner 3

Signature – Owner 2

Signature – Owner 4



CITY OF SANTA BARBARA

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.

Owner (Print): _____ Owner Signature: _____
Owner (Print): _____ Owner Signature: _____
Owner (Print): _____ Owner Signature: _____
Owner (Print): _____ Owner Signature: _____

BUSINESS OWNER'S INDEMNITY/ HOLD HARMLESS AGREEMENT (Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

Owner, by acceptance of the permit to operate a taxicab or paratransit business, does agree to hereby indemnify and hold harmless the City of Santa Barbara, its officers, employees and agents from any and all damages, claims, liabilities, costs, suits or other expense resulting from and arising out of said permit holder's operations.

In witness thereof, this Indemnity and Hold Harmless Agreement is executed on this date: _____, 20____.

Company Name: _____

Owner (Print): _____ Owner Signature: _____
Owner (Print): _____ Owner Signature: _____
Owner (Print): _____ Owner Signature: _____
Owner (Print): _____ Owner Signature: _____

Definitions for use throughout the application:

"Owner" means any person, firm, corporation or other form of business organization having proprietary control, or right to proprietary control, of any vehicle engaged in the business of providing paratransit service, as defined herein.

"Owner's permit" means a certificate which authorizes operation of a paratransit service in the City and which is issued to any person, firm, corporation or other form of business organization having proprietary control of any vehicle engaged in the business of providing paratransit services.



CITY OF SANTA BARBARA

TAXICAB/PARATRANSIT OWNER'S RESPONSIBILITIES & TERMS of PERMIT

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

Approval and acceptance of an owner's permit acknowledges owner's responsibilities including but not limited to:

INSURANCE. Maintaining, in owner's name, insurance as specified by the City, including coverage for all vehicles operating under owner's permit regardless of ownership shown on DMV registration.

DRIVERS. Maintaining and making available at all times a roster of all permitted drivers working for owner either as employee or independent contractor. Roster shall show driver's full name including any alias or "nickname", current address, permit number and expiration date, and California Driver's License number and expiration date. A copy of said roster will be provided to the City quarterly, in February, May, August and November, on dates assigned by the City Finance Department.

VEHICLE LIST. Maintaining and making available at all times a roster of all vehicles being operated under owner's permit. Roster shall show year and make of vehicle, number assigned by the City, number (if different) used by owner's dispatch system, and vehicle license plate number. A copy of said roster will be provided to the City quarterly, on the same dates as the driver roster.

MANIFESTS. Collecting a manifest from each driver daily, and submitting copies of the manifests to the City on a quarterly basis at the same time the vehicle roster is submitted. Manifests shall be clearly identified with the City assigned cab number and the date of activity. Dates of non-operation shall be listed on a separate sheet to account for any gaps in date sequence.

VEHICLE IDENTIFICATION. Assuring that all additional and replacement vehicles operated are painted in the color(s) originally approved and that identification (trade name and/or logo) conforms to original specifications. All signs, logos, lettering and numbers must be permanently affixed, not magnetic.

ACCIDENTS. Reporting all accidents involving contact of a vehicle with another vehicle or object must be noted on the daily manifests and on the quarterly inspection sheets. If another vehicle is involved, the name and address or phone number of the owner or operator of that vehicle is also to be noted on the quarterly inspection report. If an accident requires a police report, a copy of that report must be provided to the Investigative Division of the Police Department. (If the report is filed with the Sheriff's Office or the Highway Patrol, a copy must be requested from that agency and forwarded to the Police Department. If a report is filed with the Santa Barbara Police Department, only the report number need be provided.)

TERMS OF PERMIT: The term of the permit is one year, with renewal upon payment of the annual business license tax. Failure to pay before the expiration date will result in suspension of the owner's permit until the business license tax and penalty, if any, has been paid.

Failure to abide by the terms of this agreement may result in suspension or revocation of the owner's permit. Permit holder understands the grounds for revocation or suspension listed in Santa Barbara Municipal Code, Section 5.29.070, and any other section in Chapter 5.29.

As owner(s) and responsible party/parties of the below-named company, I/we understand that if I/we violate the Santa Barbara Municipal Code or applicable state laws, I/we will surrender the owner's permit immediately on request of the Chief of Police or Chief's designee.

COMPANY NAME: _____

Owner 1 Signature: _____ Owner 3 Signature: _____

Owner 2 Signature: _____ Owner 4 Signature: _____

Responsibilities of All Taxicab Company Owners

Note to ALL Owners: Keep a copy of this page for your records.

As an owner of a taxicab company in the City of Santa Barbara, you are responsible for knowing and abiding by the below information. Your signature below indicates that you have been given a copy of this list and understand you must abide by all regulations listed herein as well as all sections of **Santa Barbara Municipal Code Chapter 5.29.**

- **Owner's Permit Conditions:** Your permit is valid for one year, and only valid for the number of vehicles you pay for through the Finance Department. Each year you may renew the permit by paying the business license tax at the City Finance Department, including paying for all vehicles you will operate in your fleet.
- **Number of Vehicles in the Fleet:**
 - You must pay for all vehicles in your fleet through the Finance Department prior to obtaining authorization from the Police Department for operation. If one vehicle is removed from your fleet you may replace it with another, but at no time shall you operate more vehicles in your fleet than you have paid for with the Finance Department.
 - If you only pay for vehicles to operate four (4) days or fewer, you must list the specific days of the week each cab will be in operation. Vehicles operating outside of those days will be cited, and you will be cited for being in violation of your business license and your owner's permit. This may result in a suspension of your owner's permit, and suspension of your fleet.
 - If you pay for vehicles to operate five (5) or more days per week, you will not be asked to specify which days they will operate.
- **Uniformity of Fleet:** All fleet vehicles must be painted exactly the same color and use the exact same logo, lettering, and detailing as approved in the application, and used for the first cab in the fleet. Police Department staff has the right to suspend any vehicles which do not exactly match the approved color scheme until such cabs are brought into compliance.
- **Vehicle Numbering:** All fleet vehicles must use the assigned ID code followed by sequential numbering, starting with the number "**-01,**" and increasing with each new taxi added to the fleet. Numbers are not to be skipped, and no number shall be used twice.
- **Department of Motor Vehicles Registration:** All fleet vehicles must be registered as Commercial, Taxi.
- **Insurance:** Commercial General Liability must be maintained at \$1,000,000 and the Automobile Liability Insurance must be maintained at \$500,000 limit. ***Your permit is automatically suspended upon cancellation of any insurance.*** Prior to adding any drivers or vehicles to your fleet, the Police Department must receive an updated policy directly from the insurance company with proof that the drivers and/or vehicles have been added to the policy. Please allow a minimum of 24 hours from the time you contact the insurance company until you or the driver arrive at the Police Department; your place in line at the Police Technician's office will not be held for you if insurance is not received prior to your arrival.
- **Adding Vehicles to Fleet:** If required, you must first pay to add the vehicle to your business license at the Finance Department. You must also add the vehicle to your company insurance policy prior to your arrival at the Police Department. Next, you must bring the taxi to the Police Department for an inspection. At the time of the inspection you must present the Police Technician with: a valid DMV registration form proving that the vehicle is registered commercially as a taxicab; the yellow meter slip from the Department of Weights and Measures; and a Vehicle Inspection Sheet completed by a mechanic within 15 days.
- **Equipment:** All vehicles must be equipped with a first aid kit, a fire extinguisher, a working top light, triangles or flares, and a flashlight. The driver's permit, the rate card, and the SBPD Complaint Card must all be displayed where passengers can easily view them, with no portion concealed.
- **Passenger Logs:** The owner is responsible for ensuring that all drivers use the printed Passenger Logs approved by the SBPD. Drivers are required to complete passenger logs for every shift they work, and owners must collect these logs from the drivers regularly. The Police Department may request up to six months of passenger logs from an owner. If an owner cannot produce all logs upon request, or if any logs are missing or incomplete, the owner's permit may be suspended and/or revoked.

As owner of the below-named company, and on behalf of all those with an ownership interest, I agree that I/we will abide by all terms of the Santa Barbara Municipal Code, including the sections paraphrased above. I understand that a failure to abide by terms of the permit may result in a suspension or revocation of the Paratransit Owner's Permit.

Owner Name Printed: _____ Signature: _____

Owner Name Printed: _____ Signature: _____

Owner Name Printed: _____ Signature: _____

Company Name: _____ Date: _____



CITY OF SANTA BARBARA

PARATRANSIT OWNER APPLICATION PERSONAL INFORMATION SHEET

Page 1 of 2

Applicant Photos:

Each owner must complete this section separately. Make copies of this section, if needed, for each owner:

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 Numbers:		Email:	
Cell:	Home:		
Social Security #:	U.S. citizen?	Driver's License #	Expiration:
Date of Birth:	Place of Birth:		
Color of Eyes:	Color of Hair:	Height:	Weight:
Length of time in Santa Barbara:		Length of time in California:	
Do you have a current City of Santa Barbara Taxicab Driver Permit? <input type="checkbox"/> No <input type="checkbox"/> Yes (complete info below):			
Permit#	Exp:	Cab Company:	

Describe in detail all previous experience in the taxicab industry and any similar permits issued in any other city, state, or country:

RESIDENTIAL HISTORY: List all residences for the past FIVE (5) years, starting with most recent/current:

From:	Address:
To: PRESENT	City/State/Zip:
From:	Address:
To:	City/State/Zip:
From:	Address:
To:	City/State/Zip:
From:	Address:
To:	City/State/Zip:
From:	Address:
To:	City/State/Zip:

PERSONAL INFORMATION SHEET – Page 2

Each owner must complete this section separately. Make copies, if needed, for each owner:

EMPLOYMENT HISTORY: List last FIVE (5) previous employers, starting with most recent/current.

If applicant has fewer than 5 previous employers, applicant must indicate that in the section below:

From:	Company Name:	
To:	Address:	
	Phone:	Position:
From:	Company Name:	
To:	Address:	
	Phone:	Position:
From:	Company Name:	
To:	Address:	
	Phone:	Position:
From:	Company Name:	
To:	Address:	
	Phone:	Position:
From:	Company Name:	
To:	Address:	
	Phone:	Position:

ARREST HISTORY - (Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

List ALL arrests and citations. Include all infractions, misdemeanors, and felonies. Failure to do so may result in DENIAL of this application.

- Attach a separate sheet if necessary. If you don't recall your full arrest history, you may visit all law enforcement agencies that have arrested or cited you and request an arrest history from each.
- If you have never been arrested or cited, write "NONE". The space below cannot be left blank.

Date	Place (City/State)	Reason for Cite or Arrest	Final Conviction or Adjudication

Are you currently:

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's Verbal Verification

I verbally verified with applicant that: ☐ applicant's answer is "none" OR ☐ information listed is complete

Police Technician Initials _____ Date: _____

Applicant Acknowledgement of Police Technician's Verbal Verification: (APPLICANT: DO NOT SIGN BELOW UNTIL ASKED TO DO SO)

By initialing here, I, the named applicant, confirm that the Police Technician verbally verified my arrest history:

Applicant Initials: _____ Date: _____

CITY OF SANTA BARBARA

APPLICANT ACKNOWLEDGEMENT: APPLICATION COMPLETION & PROCESS

Each owner must complete this section separately. Make copies of this section, if needed, for each owner.

Read each section below, then initial where indicated to confirm your acknowledgement and understanding of each section:

I understand that I should not submit my application to the Police Department if I am uncertain about ANY information listed herein, or if any information is incomplete. I understand that it is my responsibility to do all research necessary to ensure that my answers are complete and accurate.

Initials: _____

I understand that my application may be processed immediately upon submission to the Police Department, and that once it is submitted, if any information is found by Police Department staff to be missing, incomplete, misrepresented, or falsified, the application may be denied.

Initials: _____

I understand that the Police Department, at the discretion of Police Department staff, may accept this application without the immediate submission of the following supplemental items: drug test results; alcohol test results; and/or photographs. I further understand that although the initial application process and background check may begin immediately after submission of the application without these items, the application will not be reviewed by the Chief's Designee until all required supplemental items are submitted to the Police Department. If the supporting items are not submitted within 12 months of the date of submission of the application, the application will become void and a new application must be submitted.

Initials: _____

By submitting this application to the Police Department, I confirm that I have included all information requested in all sections of the application form, that I have done all research necessary to support the information listed, and that I am confident that the information I have provided is complete and accurate.

Initials: _____

By signing below I confirm that I have thoroughly read, I understand, and I agree to abide by all sections on this page.

Signature

Date



CITY OF SANTA BARBARA

PARATRANSIT SERVICE OWNER ADDITIONAL REGULATIONS

OWNER-APPLICANT: Keep this page for your records/reference.

The following are regulations in addition to those found in the Santa Barbara Municipal Code. They also govern paratransit operations and were approved by the Fire and Police Commission, pursuant to Santa Barbara Municipal Code, Section 5.29.300(P).

1. A driver's permit application may be denied for failure to complete the application process.
2. A driver's permit application may be denied for making false statement(s) on the application.
3. A driver's permit application may be denied if there is one or more citations or warrants outstanding, if, in the opinion of the Police Department Investigator, it may result in a conviction of an offense that would normally result in denial or revocation of a driver's permit. An application may be reconsidered, within six (6) months of the original application date, without payment of additional application fees, when all citations or warrants have been cleared.
4. No changes in rates are to be made unless the City, Chief of Police] has been advised in writing at least thirty (30) days prior to the effective date of the new rates.
5. An owner's permit to operate is automatically suspended twenty-four (24) hours prior to time of insurance expiration, or at 5:00 p.m. of the last working day prior to time of expiration of insurance. .
6. An owner's permit application may be denied if false statements are provided on the application.

FEE SCHEDULE

FOR PARATRANSIT SERVICE APPLICATIONS, PERMITS AND APPEALS

(Set by City Council Resolution 05-060, June 21, 2005)

NOTE: All fees are non-refundable.

A. Owner Permits		
1.	Initial application for a taxicab or other paratransit	\$520.00
2.	Renewal application.	\$400.00
3.	Each background investigation conducted for an	\$ 40.00
4.	Replacement permit, document only.	\$ 25.00
5.	Change of address, document only.	\$ 10.00
B. Vehicle Permits		
1.	Initial permit for taxicab or limousine taxi, for each	\$ 55.00
2.	Renewal permit.	\$ 25.00
3.	Replacement permit, document only.	\$ 10.00
C. Driver Permits		
1.	Initial application.	\$ 204.00
2.	Livescan – Department of Justice fee	\$32.00
3.	Roll Fee for Livescan Fingerprints at SBPD	\$35.00
4.	Renewal application.	\$ 120.00
5.	Replacement permit, document only.	\$25.00
D. Appeals		
1.	Appeal to Board of Fire and Police Commissioners.	\$500.00
2.	Appeal to City Council.	\$750.00

TAB D



TAXICAB DIAGRAM LOCATION OF IDENTIFIERS

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29
and California Vehicle Code, §27901)

OWNER-APPLICANT: Use this form to assist in submission of color scheme, logo, and lettering information.



Vehicle Rates must be displayed on both sides of the vehicle effective 12/01/05. If a taxi has one or more rates, the maximum rate or all rates shall be posted. (MC 5.29.110)

Taxi company name must be displayed on both sides of vehicle.

This is mandatory.

The name of the company on the back is desirable, but not mandatory.
[CVC 27900 and MC 5.29.120(4)]

City of Santa Barbara Public Vehicle Permit must be displayed on the left side of the trunk lid with valid month sticker. (New stickers are issued every four (4) months upon receipt of new inspection reports.)

Vehicle Number assigned by the City must be displayed on both left and right front fenders, and on the right side of the back door or trunk lid.

[MC 5.29.120(4) and 5.29.170(2)]



All lettering and numerals must be at least three (3) inches in height and in colors contrasting with the background so as to be readily legible in daylight from a distance of fifty (50) feet. Exception: Vehicle Rates must be one (1) inch in height and readily legible in daylight. (CVC 27901)



Notice to Insurance Providers Regarding **PARATRANSIT INSURANCE REQUIREMENTS** for the City of Santa Barbara

OWNER-APPLICANT: Forward this section to your Insurance Provider.

TO: INSURERS

In order to operate a paratransit service in the City of Santa Barbara, a completed Certificate of Insurance must be on file with the City of Santa Barbara, Police Department, Investigative Division. The following are the minimum requirements for the Certificate of Insurance as allowed by the City of Santa Barbara:

1. Name and address of insured doing business as (DBA).
2. Location of the operations insured: within the City of Santa Barbara.
3. Description of operations: paratransit service operations.
4. Description of vehicles covered (provide a list).
5. General Liability coverage of one million dollars (\$1,000,000.00) bodily injury and property damage each person, each occurrence.
6. Automobile Liability coverage of five-hundred-thousand dollars (\$500,000.00 effective 6/1/05) each person, each occurrence.
7. City of Santa Barbara, its officers, employees and agents are named as additional insured.
8. Policies will not be canceled, limited, or changed without (30) days written notice to the City of Santa Barbara.
9. Coverage afforded the City shall apply as Primary and not Excess to any insurance issued in the name of the City of Santa Barbara.
10. Blanket or Scheduled Contractual Liability sufficiently broad to cover liability assumed in the permit. (SBMC 5.29.290: An owners permit holder shall, and by acceptance of the permit does, agree to hereby indemnify, and hold the City of Santa Barbara, its officers, employees and agents from all damages, claims, liabilities, costs, suits or other expense resulting from and arising out of said permit holders operations).
11. Policy includes Severability of Interest clause, or equivalent wording, stating that coverage applies separately to each named or additional insured as if separate policies had been issued to each.
12. Insurer must be admitted by the State of California, Department of Insurance, or have a Best's rating of B+ or better, and the agency and the agent must be licensed by the State of California. The City reserves the right to reject an insurer or an agency of the insurer.
13. Authorized signature may be the agent's if agent has placed insurance through an agency agreement with the insurer. If insurance is brokered, authorized signature must be that of an official of the insurer.

NOTICE TO INSURERS AND PARATRANSIT SERVICE OPERATORS:

In order to operate any paratransit service in the City of Santa Barbara, a completed Certificate of Insurance must be on file with the City of Santa Barbara, Police Department, Investigative Division, P. O. Box 539, Santa Barbara, CA 93102. Complete the following Certificate of Insurance. If your insurance company uses a different form, that form must contain, as a minimum, the requirements listed below.

CERTIFICATE OF INSURANCE

This certifies to the City of Santa Barbara that the following described policies have been issued to:

Name of Insured: _____

Address: _____

Location of operations insured: within the City of Santa Barbara.

Description of operations: Taxicab and/or Limousine Operations.

Description of vehicles covered: _____

POLICIES AND INSURERS	LIMITS		POLICY NUMBER	EXPIRATION DATE
	Bodily Injury	Property Damage		
General Liability <input type="checkbox"/> Comprehensive <input type="checkbox"/> Commercial _____ (Insurer)	Each Person	Each Occurrence		
	Each Occurrence			
	Combined Single Limit			
	\$1,000,000			
Automobile Liability <input type="checkbox"/> Owned <input type="checkbox"/> Hired <input type="checkbox"/> Non Owned _____ (Insurer)	Each Person	Each Accident		
	Each Occurrence			
	Combined Single Limit			
	\$500,000			

The following coverage or conditions are in effect: General Liability ☐ Automobile Liability ☐

Yes | No

1. City of Santa Barbara, its Officers, Employees, and Agents Named as Additional Insured.	
2. Policies will not be Canceled, Limited, or Changed without 30 Days Written Notice to the Police Department, Investigative Division, P.O. Box 539, Santa Barbara, CA 93102-1990	
3. Coverage afforded the City shall apply as Primary and not Excess to any insurance issued in the name of the City.	
4. Blanket or Scheduled Contractual Liability sufficiently broad to cover liability assumed in the permit. (SBMC 5.29.290: An owner's permit holder shall, and by acceptance of the permit does, agree to hereby indemnify and hold the City of Santa Barbara, its officers, employees and agents from any and all damages, claims, liabilities, costs, suits, or other expense resulting from and arising out of said permit holder's operations.)	
5. Policy includes a Severability of Interest provision or equivalent wording, stating that coverage applies separately to each named or additional insured as if separate policies had been issued to each.	

Date: _____

(Authorized Signature)

(Date)

At: _____

(Company and Address)

NOTE: Authorized signature may be the agent if agent has placed insurance through an agency agreement with the insurer.
If insurance is brokered, authorized signature must be that of official of insurer.

INSURER MUST BE ADMITTED BY THE STATE OF CALIFORNIA, DEPARTMENT OF INSURANCE, OR HAVE A BEST'S RATING OF B+ OR BETTER. THE CITY RESERVES THE RIGHT TO REJECT AN INSURER.

Taxicab Company Proposed Rate Schedule

Taxicab Company Name: _____ Date: _____

Submitted by: _____ Contact Phone: _____

Instructions:

- Fill in the proposed rate information below.
- If you plan to have more than one rate you must explain the reason for each rate.
- Rates may never be based on the number of passengers in a cab. (SBMC §5.29.115.A)
- All increments for time and distance must be listed below. (In other words, explain how much money is added to the meter per each fraction of a mile or each number of seconds.)

Company's Proposed Rates								
			Distance Increment:				Time Increment:	
Rate	First Drop	Per Mile	How many cents...	Per fraction of mile	Wait per hour	How many cents...	Per how many seconds	Reason for each rate: (ie. holidays, weekends, flagged fares, pre-arranged fares, trips within the County, etc)
1								
2								
3								
4								

Once the application has been approved, you must create "rate cards" for every cab in your fleet.

Each rate card must include:

- the company name at the top
- ALL rates as listed above
- The reasons for each rate if your company has more than one rate.
- Tire pressure at the time the meter was calibrated.

The approved rate card must be displayed on the interior of the cab where the passengers can clearly see it.

NOTE: "Minimum" fares are prohibited. You may never charge more than the metered rate.

SAMPLE MANIFEST/PASSENGER LOG

Company Name
Company Address * Company Phone

Date:		Driver #		Driver Name:			
Cab #		VIN#			Shift Start:		Shift End:
	Time: Pick up	Time: Drop off	Pick Up location	Destination	# PAX	Rate used:	Fare
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

THIS PAGE TO BE COMPLETED BY TAXI COMPANY OWNER/AUTHORIZED AGENT
for any drivers hired to your company. Make copies as needed.

APPLICANT: Submit this completed form, along with:

- ☐ 2 passport-sized photos
- ☐ \$10 Replacement permit fee
- ☐ current driver's permit

to the Police Technician at the SB Police Department: 215 E. Figueroa St.



NOTICE OF INTENT TO HIRE TAXICAB DRIVER PERMIT

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

PHOTO

DATE Stamp

PAID Stamp

\$10 Replacement Fee

Applicant name: _____

Taxicab Company: _____

As the Owner or authorized representative of the above-listed company, my signature below, or the signature of an authorized agent on my behalf, is to serve as my acknowledgement of and agreement to the following statements:

- I intend to hire the above-listed person as a taxicab driver for the above company. Employment shall become effective on the date the driver is added to the company insurance policy;
- I have verified that the individual named above is a legal resident and entitled to work in the United States;
- I have discussed all rules and regulations set forth in Santa Barbara Municipal Code §5.29 Paratransit Ordinance with the driver;
- I will not allow this driver to operate a taxicab for my company until the applicant has been issued a City Operator's Permit to drive for the above-listed company. I will only allow the driver to work for my company while s/he has a valid City Operator's permit issued in the name of this company;
- I assume responsibility for the actions of this driver when s/he is operating a taxicab for the above-listed company;
- I will not allow this driver to drive for my company nor operate any company vehicles unless both the driver and the vehicle are fully insured per the terms of the Santa Barbara Municipal Code.
- I understand and agree to all terms listed herein.

Owner/Agent Name: _____

Owner/ Agent Signature*: _____

Title: _____ 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.*