



h. **Names, Associations, Place Of Business And Residence Of Each Partner** (If corporation or limited or general partnership, list name and title of all officers or joint ventures or partners, and the permanent addresses and telephone numbers, and percentage of participation in business of each on separate page(s) identified as response to this question and attach to this application 5.30.030(1).)

4. **Please Identify The Name Of The Person Who Will Be Responsible Or Oversee Day-To-Day Operations.**

5. **Have Any Of The Principals Associated With This Business Been Convicted Of A Felony? If Yes, Please Explain.**

6. **Please Describe In Detail Why There Is A Need For Your Proposed Service.**

7. **Description Of Motor Vehicles To Be Used** (Disclose the manufacturer name, vehicle color, the motor number, and state license plate number of each vehicle, and the type of insignia 5.30.030 (2).)

8. **Explain Where The Vehicles Will Be Serviced, Maintained AND Stored during non-operating hours.**



9. **Provide A Summary Statement Of Operation** (include a description of the type of service to be provided, the hours of proposed operation, proposed routes and schedules for regularly scheduled service on fixed routes or a statement of the proposed method of operation of a nonscheduled service, a statement of fares to be charged, the street number and exact location of each place where the applicant proposes to stand any such vehicle or pick up passengers 5.30.030 (3).)

10. **Provide A Statement And Evidence Of Financial Responsibility** (Describe how the business will be financially operated and attach additional information, if needed. Additional information may be required by the City Manager or City Council, and shall be to the satisfaction of the City Manager or City Council 5.30.030 (4).)

16. Does The Applicant Currently Lease Cabs To Drivers. If Yes, Please Explain (If The Applicant Plans To Lease Vehicles To The Drivers, Please Provide A Sample Copy Of The Lease Agreement And The Cost To The Driver.)

17. Describe In Detail How Calls Will Be Dispatched And How The Applicant Will Monitor The Dispatch Operation And Response Times. How Are Calls Allocated To Drivers?

18. What Procedure Do You Follow When A Complaint Is Received?

19. Provide Evidence Of Two-Way Communication In Each Authorized Taxicab In Use For Both Business Use And In Case Of Emergency. (Provide Attachment(s) As Evidence Of Compliance.)

20. Describe Your Record Keeping And Data Generation Procedure In Terms Of Information Produced And How The Data Can Be Used To Measure Performance.

21. Does The Applicant Plan To Have An Office Or Other Facility Within The City Of King? If Yes, Please Explain.

22. Will The Applicant Be Requesting A Stand(s) In The Public Street? If Yes, Please Explain.



23. Have Any Of The Passenger Carrying Vehicles Operated By Applicant Been Taken Out Of Service For Safety Or Other Reasons By The California Highway Patrol, Any Other California Law Enforcement Agency, Or Any Governmental Agency Of This State? If Yes, Please Explain.

24. List Names Of All Drivers Operating The Taxicab(s), California Driver's License Number And Residence Address Of The Driver(s) Including Street, City, State And Zip Code And Telephone Number With Area Code As Well As A Photocopy Of Each Driver's Valid DMV License And A Photocopy Of Both Sides Of The Driver's Permit On Separate Page(s).

25. Does The Applicant Plan To Serve The Disabled And The Elderly? Please Explain.

26. Does Your Firm Plan To Accept Credit Cards For Services Provided?

27. Does Your Firm Plan To Offer Discounts Or Special Fares? If Yes, Please Explain.

I hereby declare under penalty of perjury under the laws of the State of California that the foregoing information in this application is true and correct to the best of my knowledge. Applicant signifies by signing this application, the applicant agrees to meet the requirements of the City of King Municipal Code if the application is approved by the City.

Applicant Signature: _____

Date: _____