

**CITY OF HOOD RIVER**  
**APPLICATION FOR TAXICAB BUSINESS**  
HRMC 5.20

**Fees: \$94 per year per vehicle (Non-refundable)**

(\$71 after July 1) Includes Annual Vehicle Safety Inspection

\*\* \$12 check or money order written to Oregon State Police for Background Check

Date \_\_\_\_\_ New Applicant \_\_\_\_\_ Renewal \_\_\_\_\_

Company name \_\_\_\_\_  
Business address \_\_\_\_\_ Phone \_\_\_\_\_  
E-Mail address \_\_\_\_\_

Resident owner \_\_\_\_\_  
Business address \_\_\_\_\_ Phone \_\_\_\_\_

2nd Resident owner \_\_\_\_\_  
Business address \_\_\_\_\_ Phone \_\_\_\_\_

*If you are a corporation, you must provide the names and addresses of those owning more than 20% of the stock of the corporation. Use separate page if necessary.*

Identify each vehicle to be placed in use: [Annual safety inspection required]

<u>Make</u>	<u>Year</u>	<u>Type</u>	<u>License Plate #</u>	<u>Total</u>	<u>Seating</u>
Capacity					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Annual safety inspection of each cab is required. Contact City Police to schedule inspection: 386-3942.**

**BEFORE OPERATING ANY TAXICAB, YOU MUST FILE A COPY OF YOUR PUBLIC LIABILITY INSURANCE POLICY WITH THE CITY RECORDER, IN THE AMOUNTS INDICATED BY ORS. 30.270. POLICY MUST PROVIDE FOR 30-DAY NOTICE OF CANCELLATION TO CITY. HRMC 5.20.080.**

Have you ever been convicted of a crime involving moral turpitude or a dangerous drug?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give details as to charge, court and date \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a major traffic offense (driving under the influence of intoxicants, driving while suspended, reckless driving, or hit and run)?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give details as to charge, court and date \_\_\_\_\_

List 4 credit references:

<u>BUSINESS</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_  
Agent \_\_\_\_\_ Phone \_\_\_\_\_

**By signing this permit I am stating that I have read it in its entirety and agree to comply with all applicable ordinances, resolutions and policies of the City of Hood River.** "I certify all information given on this application, and any supporting information, is true and complete. I hereby authorize the City of Hood River to make all necessary contacts and/or inquiries needed to check my background, and to ensure I qualify for this permit. I also hereby authorize the City of Hood River to conduct a criminal background check and obtain a copy of my criminal record, if any. All references are authorized to release to the City of Hood River all information requested which they might have about me. I hereby release all references and the City of Hood River from any liability which might be claimed because of information provided by such references or background checks."

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**MAXIMUM TAXICAB RATES ESTABLISHED BY COUNCIL RESOLUTION 2012-12**

\*\*\*\*\*

**CITY USE ONLY**

\_\_\_\_\_  
Chief of Police \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

License issued: \_\_\_\_\_ Receipt # \_\_\_\_\_ License # \_\_\_\_\_ Expires: \_\_\_\_\_

## TAXICAB CO. & DRIVER LICENSING PROCEDURE

If there are any changes to your insurance, vehicles or drivers throughout the year, you must inform the City of Hood River immediately.

### **BUSINESS OWNER:**

1. Provide to Applicant packet containing:
  - Application for Taxicab Business
  - Business/Driver Checklist
  - HRMC 5.20
  - Resolution 2005-18 (Rates)
  - ORS 30.270
  
2. Applicant to provide to City Recorder:
  - \_\_\_\_\_ Completed Application for Taxicab Business (**date stamp when received**)
  - \_\_\_\_\_ Fee (Business) - \$94/yr. (per vehicle); \$71 after July 1<sup>st</sup>
  - \_\_\_\_\_ \$12 check or money order written to Oregon State Police for Background Check
  - \_\_\_\_\_ Copy of valid OR/WA Driver License  
(check vehicle capacity - Class C CDL required for vehicles for 16 or more)
  - \_\_\_\_\_ Schedule of Rates (initial rates, changes require Council approval)
  - \_\_\_\_\_ Insurance certificate (per ORS 30.270) for each vehicle, policy must provide for 30-day cancellation notice to City
  - \_\_\_\_\_ Taxicab Inspection Sheet (completed by PD). This is done annually for each vehicle
  - \_\_\_\_\_ Fingerprint Card(s) fingerprinting is done @ the Police Dept.
  - \_\_\_\_\_ Fingerprint Card(s) – mail to Salem

**Taxi Driver Permits expire January 15<sup>th</sup> of each year. Start renewal process by December 1<sup>st</sup>.**

### **DRIVER:**

1. Provide to Applicant packet containing:
  - Application for Each Driver
  - Business/Driver Checklist
  - HRMC 5.20
  
2. Applicant to provide City Recorder:
  - \_\_\_\_\_ Completed Application for each taxicab driver (**date stamp when received**)
  - \_\_\_\_\_ Fee (Driver – New/Renewal) - \$55/yr.
  - \_\_\_\_\_ \$12 check or money order written to Oregon State Police for Background Check
  - \_\_\_\_\_ Copy of valid OR/WA Driver License  
(check vehicle capacity - Class C CDL required for vehicles for 16 or more)
  - \_\_\_\_\_ Insurance certificate (per ORS 30.270) showing driver as additional insured under company policy, policy must provide for 30-day cancellation notice to City
  - \_\_\_\_\_ Fingerprint Card(s) fingerprinting is done @ the Police Dept.
  - \_\_\_\_\_ Fingerprint Card(s) – mail to Salem

**Taxi Driver Permits expire January 15<sup>th</sup> of each year. Start renewal process by December 1<sup>st</sup>.**