



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

COMPANY OPERATING CERTIFICATE APPLICATION

Submit a completed application packet consisting of the following payments and enclosures. **Incomplete Applications, Documents or Enclosures will not be accepted. (Money Order, or Company Check ONLY)**

1. **\$625 Company Operating Certificate Fee** Non-refundable
2. **Company Operating Certificate Application** Completed, signed and dated that includes:
 - A. Owner/Manager Information Form (Complete one for each owner)
 - B. Metered Vehicle Layout/Color Scheme Form (For Taxi Companies ONLY)
 - C. Driver Summary Form (List ALL Drivers)
 - D. Vehicle Summary Form (List ALL Vehicles)
 - E. Authority For Release Form (For each fingerprint card)
 - F. Rate Sheet – Company to create and submit as required by Sec. 22-153 of City Ordinance
3. A Certified copy of NC Articles, Bylaws, or Operating Agreement, for all New Business Enterprises.
4. **Criminal Records** *Only If asked to provide. All court records must come from the respective Clerk of Criminal Court offices in the **STATE** (Not city or county) **outside North Carolina**. Faxed and Internet documents from third parties will not be accepted. **(New Company Applications Only)**
5. **Driver's License(s)** For each Owner/Manager
6. **Out of State Driver Record/History/Abstract** for other states you have lived in. *Only if asked to provide. Internet documents from third parties will not be accepted.
7. **Social Security Card(s)** For each Owner/Manager. Social Security Card must be signed to be a valid document. **(Bring the original to the appointment, do not email this document).**
8. **Immigration Documents** Certificate of Naturalization, Passports with INS 551 Stamps, I-9 Card with necessary work authorization stamp, Employment Authorization Card, or Permanent Resident Card (Green Card).
9. **Fingerprint Card** All new employees/owners must complete and at least once every three (3) years. Fingerprint cards may be obtained from the Mecklenburg County Sheriff's Office or any authorized third-party provider. Reason will be: PVH Permit.
10. Metered (taxi) companies must have commercial **"T" plates** for all vehicles. Nonmetered companies (Limo, Transportation, Shuttle) must have commercial For Hire **"Z" plates**. Companies contracted directly with DSS and/or CMS are exempt. Attach a copy of your DSS or CMS contract. NO THIRD PARTY contracts are excepted.

Applications are online at: <https://www.charlottenc.gov/cmpd/Our-Organization/PVH>

The Passenger Vehicle for Hire Office conducts all business **BY APPOINTMENT ONLY**:
Monday through Thursday, 8:00 AM -11:00 AM, and 1:00 PM - 4:00 PM, Friday, 8:00 AM -11:00 AM

Safety Specialists (Inspectors)

Roberta Blackwell: 704-336-3925, Roberta.Blackwell@cmpd.org

John "Jay" Mitchell: 704-432-5139, John.Mitchell@cmpd.org

Ronald Silvera, 704-432-1562, Ronald.Silvera@cmpd.org



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COMPANY OPERATING CERTIFICATE APPLICATION

Company Name:			Date:	
Street Address:		City:	State:	Zip:
Mailing Address (if different):		City:	State:	Zip:
Company Email Address:			Primary Contact Person:	
Work Phone:	Cell Phone:	Fax Number:		
Application Type				
Check One:	<input type="checkbox"/> New <input type="checkbox"/> Renewal			
Check One:	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Association <input type="checkbox"/> Corporation			
Check One:	<input type="checkbox"/> Metered <input type="checkbox"/> Non-Metered			
Operation of a passenger vehicle for hire in the City of Charlotte is governed by Chapter 22 of the Charlotte City Code. Applicants shall read and understand all requirements in Chapter 22 prior to applying for a company operating certificate.				
Certification and Authorization				
We, the undersigned applicant(s) certify that we submit this application in accordance with the provisions reflected in Chapter 22 of the Charlotte Code, the "Passenger Vehicles for Hire" ordinance. All information submitted in the application is neither false nor misleading and we understand that submitting, or causing to be submitted, false or misleading information is unlawful and shall be grounds for denial of an application. We are currently in compliance and will continue to comply with all requirements contained in the Passenger Vehicles for Hire Ordinance.				
Owner 1 Print Name: _____ Signature: _____ Date: _____		Owner 2 Print Name: _____ Signature: _____ Date: _____		
Owner 3 Print Name: _____ Signature: _____ Date: _____		Owner 4 Print Name: _____ Signature: _____ Date: _____		

All company applications will be reviewed, a preliminary background investigation conducted, and a final determination will be made. Companies will be contacted by phone, and or email for final determination information. If your application is denied, a written notification of denial will be provided.

Company operating certificates must be renewed annually. In certain situations, when applying for a Company Operating Certificate renewal, you may be asked to provide additional information from the listed items above. All taxicab company operating certificates expire each year at midnight, July 31st. other companies will expire annually from the month your company was approved.



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COMPANY OWNER/MANAGER INFORMATION

(Complete one for each)

Company Name:		Company Owner / Manager Name:	
Home Phone:		Cell Phone:	
Email:		Fax:	
Applicant Name:	Social Security Number:	Driver License Number and State:	Date of Birth:
Address Information (Street, City, State, ZIP):			# years at address:
Criminal History. Provide dates, locations, and dispositions of ALL arrests, convictions, incarcerations, probationary sentences, or traffic citations OF ANY KIND. Attach separate sheets to provide full documentation of all past civil and criminal activity, INCLUDING ALL OUT-OF-STATE activity.			
<input type="radio"/> NONE (Court statement of no record attached)		<input type="radio"/> YES (Full documentation attached)	
Remarks:			
Applicant's Signature:			Date:



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METERED VEHICLE LAYOUT/COLOR SCHEME

Company Name:		Date:
<p>Provide the uniform color scheme and logos painted or to be painted on Metered Vehicles.</p> <p>Attach a full color diagrammatic layout of a representative vehicle and include paint swatches of all proposed colors.</p>		
	Primary Color	Secondary Color(s) (if applicable)
Hood		
Roof		
Trunk Lid		
Sides		
Lettering		



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

AFFILIATED DRIVER SUMMARY

	Driver Name	Driver License Number & State	Driver Permit Number	Permit Expiration Date
List All Drivers				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
Reproduce additional copies of form to document all drivers.				
Company Name:		Signature:		Date:



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AFFILIATED VEHICLES SUMMARY

	Vehicle Number	Tag Number	VEHICLE IDENTIFICATION #	Vehicle Owner Name	Ins. On File (Yes/No)	Ins. Verified By Company Owner(s) (Yes/No)
List All Vehicles (company and independently owned).						
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
Reproduce additional copies of form to document all vehicles.						
Company Name:				Signature:	Date:	

AUTHORITY FOR RELEASE OF INFORMATION

"NATIONAL RECORD CHECK"

I authorize the North Carolina Department of Justice through the **State Bureau of Investigation**, Special Operations Division to perform a fingerprint search of the State's criminal history record file and a Fingerprint search of the **Federal Bureau of Investigations'** files for a national criminal history record check in connection with my application for taxi driver license with the **Charlotte-Mecklenburg Police Department** Pursuant to N.C.G.S. 160A-304 and ordinance.

(Type or print legibly)

Last Name First Name Middle Maiden

____/____/____ Male _____ Female _____
Date of Birth Race

I understand that the North Carolina State Bureau of Investigation, Special Operations Division, the Federal Bureau of Investigation, and its officials and employees shall not be held legally accountable in any way for providing this information to the above-named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the above-named agency cannot provide a hard copy of the results of this criminal history record check to me.

Applicant's Signature Date ____/____/____

The fingerprint card must be accompanied with a transmittal letter from the Authorized Official or Individual requesting Criminal History Record Information. This Authority for Release form must be kept on file for one year.

The request must be mailed to: State Bureau of Investigation, Criminal Information and Identification Section,
Attn.: Applicant Unit, PO Box 29500, Raleigh, NC 27626-0500

ORI # NCO600100-Charlotte-Mecklenburg Police Dept. – Taxi Drivers National Fingerprint Card Check - \$38.00