POLICE

CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

COMPANY OPERATING CERTIFICATE APPLICATION

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

- 1. \$465.00 Company Operating Certificate Fee Non-refundable, \$100.00 Late Renewal Charge Per Day.
- 2. Company Operating Certificate Application Completed, signed, and dated.
 - A. Owner/Manager Information Form (one for each owner)
 - B. Metered Vehicle Layout/Color Scheme Form (Taxi Companies ONLY)
 - C. Driver Summary Form (List ALL Current Drivers)
 - D. Vehicle Summary Form (List ALL Current 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
 - G. Training Manual as required by Sec. 22-125, (b)3.
 - H. Print Charlotte City Ordinance Sec. 22,
- 3. A Certified copy of NC Articles, Bylaws, or Operating Agreement, for all New Business Enterprises.
- 4. **Driver's License(s)** For each Owner/Manager
- 5. <u>Drug Test Results</u> Receipt can be submitted to begin application process.
- 6. <u>Out of State Driver Record/History/Abstract</u> for other states you have lived in. *Only if asked to provide. Internet documents from third parties will not be accepted.
- 7. <u>Criminal Records *Only If asked to provide. All court records must come from the Clerk of Criminal Court in the STATE outside N.C.. Faxed and Internet documents from third parties not accepted.</u>
- 8. <u>Social Security Card(s)</u> 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).
- 9. <u>Immigration Documents</u> Certificate of Naturalization, Passports, I-9 Card with necessary work authorization stamp, Employment Authorization Card, or Permanent Resident Card (Green Card).
- 10. <u>Fingerprint Card</u> All new employees/owners must complete and at least once every three (3) years. Obtained from the Mecklenburg County Sheriff's Office or any authorized third-party provider. Reason will be: PVH Permit.
- 11. 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 online at: https://www.charlottenc.gov/cmpd/Our-Organization/PVH
The Passenger Vehicle for Hire Office conducts all business BY APPOINTMENT ONLY
Monday -Thursday: 8:00 AM -11:00 AM, and 1:00 PM - 4:00 PM, Friday: 8:00 AM -11:00 AM

Safety Specialists (Inspectors)

R. Blackwell: 704-336-3925, Roberta.Blackwell@cmpd.org, W. Rivera: 704-432-5139, Wilson.Rivera@cmpd.org, R. Silvera, 704-432-1562, Roberta.Blackwell@cmpd.org, W. Rivera: 704-432-5139, Wilson.Rivera@cmpd.org, R. Silvera, 704-432-1562, Roberta.Blackwell@cmpd.org, <a href="mailto:Roberta.Blackwel

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ACKNOWLEDGEMENT FORM CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~ PASSENGER VEHICLES for HIRE UNIT ~

All for-hire drivers, for-hire vehicle owners, and for-hire company owners must read, initial and sign this form as part of the application and renewal process.

| Chapter 22 – Charlotte City Code of Ordinances | | | |
|--|-------------------------------------|--|--|
| I understand that Chapter 22 of the Charlotte City Code o regulates all for-hire vehicles. [] initial | f Ordinances ("PVH Ordinance") | | |
| I understand that the PVH Ordinance provides for random staff. [] initial. | audits and inspections by the PVH | | |
| I understand that the PVH Ordinance does not prohibit me Transportation Network Company ("TNC") (i.e. Uber, Lyft, Network Company ("BTNC") (i.e. Arro, Curb, etc.). [| etc.) or a Brokering Transportation | | |
| Transportation Network Companies | | | |
| If I choose to contract with a TNC and/or a BTNC, I under the PVH Ordinance and State laws related to the regulation (Chapter 20 of the North Carolina General Statutes, Articl Companies §§20-280.1-20-280.14). [] initial | on of TNCs and TNC drivers. | | |
| I understand that even if there are periods of time when n rendered, my for-hire vehicle remains subject to regulatio but not limited to compliance with vehicle requirements ar PVH Unit. [] initial | n by the PVH Ordinance, including | | |
| Background Checks | | | |
| I understand that the PVH Unit will not provide me a back purpose of exclusively operating as a TNC driver. [| | | |
| I agree that I am requesting a background check/PVH per a for-hire driver, for-hire vehicle owner, or for-hire compare [] initial | | | |
| Signature: | Date: | | |
| Printed Name: | Date: | | |
| PVH Staff Signature: | Date: | | |
| Printed Name: | | | |

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~PASSENGER VEHICLES for HIRE UNIT~

COMPANY OPERATING CERTIFICATE APPLICATION

| Company Name: | | | | | Da | te: |
|---|---------------------|--|--------------|-----------------|----------------|---------------|
| Street Address: | | City: | | State: | Zip: | |
| Mailing Address (if different): | | | City: | | State: | Zip: |
| Company Email | Address: | | | Primary Contact | Person: | |
| Work Phone: | | Cell Phone: | | Fax Numbe | r: | |
| | | APPLICA' | TION TY | PE | | |
| Check One: | New | ☐ Rer | newal | | | |
| Check One: | Sole Propri | etorship | tnership | Association | C | orporation |
| Check One: | Metered | ☐ Nor | n-Metered | | | |
| | | <mark>hicle for hire in th</mark> | | | | |
| the Charlotte C | | olicants shall read | | · · | | in Chapter 22 |
| | | <mark>applying for a cor</mark> TIFICATION AN | | | te. | |
| We the unders | | | | | in acco | dance with |
| 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 Hir | | to comply with a | ii requirei | | | doscriger |
| Owner 1 | | | Owner 2 | | | |
| Print Name: | | | Print Name: | | | |
| Signature: | | | Signature: _ | | | |
| Date: | | | Date: | | | |
| Owner 3 | | | Owner 4 | | | |
| Print Name: | | | Print Name: | | | |
| Signature: | | | Signature: | | | |
| Date: | | | Date: | | | |
| OFFICE USE ONLY | | | | | | |
| | | | | | | |
| □ Fee paid | | □ Registratio | n Receive | ed 🗆 C | ertificate | of Insurance |
| ☐ Late Fee – \$ ☐ # of Days La | S100 per day ate | □ Certificate | of Insuran | ice D | rug Test, | If applicable |
| □ Driver's Lice | nse | □ Articles of I | ncorporat | ion 📗 🗔 Fi | ngerprint | Card |
| □ Social Secu | rity Card(s) | ☐ Immigration Docs ☐ | | | | |

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~PASSENGER VEHICLES for HIRE UNIT~

COMPANY OWNER(S) / MANAGER(S) INFORMATION

| Company Name: | | | Company Owner / Manager Name: | | |
|---|------|--------|-------------------------------|-------------|-------------------|
| Home Phone: | Cell | Phone: | | | |
| Email: | | | | | |
| Applicant Name: | | | Driver Lic Number an | | Date of Birth: |
| Address Information (Street, City, State, ZIP): | | | | | |
| | | | | | |
| | | | | | |
| 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. | | | | | |
| □ NONE (Court statement of no record attach | ned) | YES (F | ull documenta | ition attac | hed) |
| Remarks: | | | | | |
| Applicant's 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. All other companies will expire annually from the month your company was approved.

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~PASSENGER VEHICLES for HIRE UNIT~

TAXI COMPANY

METERED VEHICLE LAYOUT/COLOR SCHEME

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

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~PASSENGER VEHICLES for HIRE UNIT~

AFFILIATED DRIVER SUMMARY

| | Driver Name | | Driver License Number & State | Driver Permit Number | Permit Expiration Date |
|---|-------------|------|-------------------------------------|----------------------------|------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |
| 14 | | | | | |
| 15 | | | | | |
| 16 | | | | | |
| 17 | | | | | |
| 18 | | | | | |
| 19 | | | | | |
| 20 | | | | | |
| Print copies of this form if needed to list additional drivers. | | | | | |
| Company Name: Signat | | ure: | | Date: | |

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~PASSENGER VEHICLES for HIRE UNIT~

AFFILIATED VEHICLES SUMMARY

| Lis | List All Vehicles (company and independently owned). | | | | | | |
|--|--|---------------|-----------------------------|--------------------|-----------------------------|--|--|
| | Vehicle Number | Tag Number | VEHICLE IDENTIFICATION # | Vehicle Owner Name | Ins. On File (Yes/NO) | Ins. Verified by Company Owner(s) (Yes/No) | |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | | | | | | | |
| 13 | | | | | | | |
| 14 | | | | | | | |
| 15 | | | | | | | |
| 16 | | | | | | | |
| 17 | | | | | | | |
| 18 | | | | | | | |
| Print copies of this form if needed to list additional vehicles. | | | | | | | |
| Company Name: | | | | Signature: | Date: | | |

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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

| | ursuant to N.C.G.S. 160/ | | | otto ivioottionibarg |
|--|--|--|--|---|
| (Type or print legibl | | | | |
| Last Name | First Name | | Middle | |
| Maiden | | | | |
| // Date of Birth | Race | Male | Femail | |
| Federal Bureau of Invin any way for providing agency and persons | North Carolina State Bur vestigation, and its officiang this information to the from all liability which mat the above-named agod check to me. | als and employees so above-named age ay be incurred as a | shall not be held le ency, and I hereby result of furnishing | gally accountable release said such information |
| Applicant's Signature | | Dat | e/ | |
| | nust be accompanied wit Criminal History Record ear. | | | |
| The request must be Section, | mailed to: State Bureau | of Investigation, Co | riminal Information | , and Identification |
| Attn.: Applicant Unit, | PO Box 29500, Raleigh, | NC 27626-0500 | | |
| ORI # NCO600100-C Check - \$38.00 | harlotte-Mecklenburg Po | olice Dept. – Taxi D | rivers National Fin | gerprint Card |

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