

Date September 27, 2010

PUBLIC HEARING UPON APPLICATION OF  
JOY RIDE TRANSPORT LLC  
FOR A LICENSE TO OPERATE A PARATRANSIT TAXICAB SERVICE  
IN THE CITY OF DES MOINES

WHEREAS, Section 126-181 of the Municipal Code of the City of Des Moines, Iowa, forbids the operation of a paratransit taxicab as defined under the paratransit taxicab subchapter of the municipal code (Article IV of Chapter 126) as a vehicle for hire upon the streets of Des Moines without obtaining a license; and

WHEREAS, Joy Ride Transport LLC, 1580 SE Bristol Drive, Waukee, Iowa, has filed an application requesting permission of the City Council to operate a paratransit taxicab service in the City of Des Moines, with a total of three vehicles; and

WHEREAS, pursuant to Section 126-155 on September 13, 2010, by Roll Call No. 10-1461, the City Council has fixed this date as the time and place for a public hearing on the matter of the application; and

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Des Moines, Iowa:

That the hearing is hereby closed and the application is granted or denied, as the case may be, as set out in the next paragraph.

\_\_\_\_\_ Alternative One: That the application for a license to operate a paratransit taxicab service be approved and hereby granted and the City Traffic Engineer is directed to issue a license stating the name and address of the applicant, the number of vehicles authorized under the license, and the date of issuance, it being the finding of this City Council of the City of Des Moines that the applicant has complied with Section 126-155(c) and Sections 126-187 and 126-188 of the Municipal Code;

or

\_\_\_\_\_ Alternative Two: That the application for a license to operate a paratransit taxicab service be hereby denied as specified below upon the specific grounds and facts set forth below.

★ Roll Call Number

Agenda Item Number

47B

Date ..... September 27, 2010 .....


Denial based on non-compliance with Subsection 126-155(c) and Sections 126-187 and 126-188 of the Municipal Code:  
(specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BE IT FURTHER RESOLVED that upon adoption of Alternative One (to grant the license), the City Traffic Engineer is hereby directed to issue a license to Joy Ride Transport LLC stating the name and address of the applicant, the number of vehicles authorized under said license, as set out in the application, and the date of issuance.

(Council Communication Number 10-576 Attached)

MOVED BY \_\_\_\_\_ to adopt.

APPROVED AS TO FORM:

  
\_\_\_\_\_  
Lawrence R. McDowell  
Deputy City Attorney

COUNCIL ACTION	YEAS	NAYS	PASS	ABSENT
COWNIE				
COLEMAN				
GRIESS				
HENSLEY				
MAHAFFEY				
MEYER				
MOORE				
TOTAL				

MOTION CARRIED

APPROVED

\_\_\_\_\_  
Mayor

**CERTIFICATE**

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

\_\_\_\_\_  
City Clerk

**Para-Transit Company Application Checklist**

**Applicant: Joy Ride Transport LLC  
1580 SE Bristol Dr, Waukee, IA 50263**

**Aug. 16, 2010**

*Paratransit service means specialized transportation services only for wheelchair bound persons provided by a paratransit taxicab.*

*Paratransit taxicab means a taxicab equipped and operated exclusively for the provision of paratransit services.*

*Taxicab driver's license means the permission granted by the city to a person to drive a taxicab (or paratransit vehicle) upon the streets of the city issued in the form of a metal badge.*

*Paratransit license means the annual license granted to a person to conduct a paratransit service in the city.*

*Trip card means a daily record prepared by a paratransit driver of all trips made by him or her showing the time and place of origin, destination, number of passengers, and the amount of fare for each trip.*

Chapter 126, Division 3 and subsection §126-117(a) concerning taxicab drivers' licenses and drivers licensed under such division and subsection shall apply to the operation of a paratransit service.

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*In this context, where the word "taxicab" is used, it is also intended to encompass paratransit vehicles and define them, for the purpose of the requirements of the Vehicles for Hire Ordinance, as paratransit taxicabs. Similarly, "certificate" shall also mean a license as would be issued to a Paratransit Business.*

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**Marked blocks w/ initials indicates that the applicant has provided documentation meeting or exceeding the requirements of the Municipal Code of the City of Des Moines. ⊗ Indicates an operational requirement that the applicant must meet.**

**Sec. 126-118. Vehicle condition.**

- ⊗ (a) Prior to its use and operation, each vehicle shall be made to comply with all applicable requirements of the state motor vehicle code and other state and city laws.
- WRB  
☑ (g) Each vehicle shall be not greater than ten (10) years old, based on the model year of production, and shall include all standard safety features in proper working order. The ten (10) year maximum age limit will not disqualify a vehicle from use as a taxicab until January 1, 2011, provided the vehicle complies with all other requirements. Does not apply – effective 1/1/2011.

**Sec. 126-119. Designation.**

- meB  
☑ (a) Each taxicab shall bear on the outside of a door on each side the name of the holder; and, in addition, may bear an identifying design. The markings shall be painted or affixed by decal in letters or figures at least two inches in height. Any

licensed vehicle shall not have a color scheme, identifying design, monogram, or insignia that will conflict with or imitate any existing taxicab or any official or emergency vehicle color scheme, in a manner that will mislead or deceive or defraud the public.

*meB*

- (b) Each taxicab shall bear on the inside of the passenger compartment clearly visible to passengers a sign which denotes the name of the holder and the number used by the holder to designate the vehicle.

### **Sec. 126-150. Reports and records.**

*meB*

- (a) Each driver shall maintain a daily trip card. All complete trip cards shall be returned to the holder by the driver at the conclusion of his or her tour of duty. The forms for each trip card shall be furnished to the driver by the holder and shall be approved by the chief of police.
- (b) Each holder shall submit to the traffic engineer a report by January 30 of each year summarizing the activity of the previous year. The report shall contain general information on number and types of complaints received including information on any discrimination complaints; number of trips per vehicle; age, mileage and general condition of each vehicle; tenure and turnover of drivers; periodic normal response time and other information as required by the traffic engineer. **Annual (year-end) Requirement. Does not apply for a new application process.**
- (c) Each holder of a certificate shall retain and preserve all trip cards in a safe place for at least one month following the date of making the record. Trip cards shall be available to the chief of police and the traffic engineer.

*meB*

### **Sec. 126-187. Liability insurance.**

- (a) A certificate shall not be issued or continued in effect unless and until the owner of the taxicab business furnishes to the traffic engineer an insurance policy or policies, or certificate of insurance, issued by an insurance company having an A.M. Best rating of no less than B+. The policy(ies) shall include commercial general liability insurance coverage and automobile liability insurance coverage, or the equivalent thereof, for the taxicab business and independent contractors of the taxicab business. The commercial general liability insurance shall include coverage for bodily injury, death and property damage with limits of liability of not less than \$750,000.00 per occurrence and aggregate combined single limit. The automobile liability insurance shall include coverage for bodily injury, death and

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property damage with limits of liability of not less than \$750,000.00 per occurrence combined single limit.

*MRB*

(a) The certificate of insurance referred to in this section shall provide that the insurance policy or policies have been endorsed to provide 30 days advance written notice of cancellation, 45 days advance written notice of non-renewal, and ten days advance written notice of cancellation due to nonpayment of premium, and that these written notices shall be provided by registered mail to the traffic engineer.

(c) The cancellation or other termination of any required insurance policy shall automatically revoke and terminate the certificate and all licenses issued for the taxicab business, independent contractors and the vehicles covered by such insurance policy(ies), unless another policy(ies), complying with this section, shall be provided and in effect at the time of such cancellation or termination. The traffic engineer shall immediately issue written notification of the revocation of said certificate and all licenses for the taxicab business, independent contractors and the vehicles covered by such insurance which is cancelled or terminated and shall file a copy of such notice with the city council.

**Sec. 126-188. Licenses.**

*MRB*

(a) A certificate shall not be issued or continued in effect unless its holder has paid to the finance director an annual calendar year certificate fee for the right to engage in the taxicab business and an annual license fee for each vehicle operated under a certificate in the amount set forth in the schedule of fees adopted by the city council by resolution.

(b) Whenever a license is issued by the traffic engineer under the terms of this division, a metal plate or identification sticker for each vehicle operated shall be delivered to the holder. The metal plate or identification sticker shall be approximately three inches in width and six inches in length and shall have stamped or printed thereon the word "taxicab," the official license number and the date of expiration of the license. The plate or sticker shall be affixed in a conspicuous place on the rear of the vehicle for which the license is granted. It shall be a distinctly different color each year.

*MRB*

(c) The holder shall file with the traffic engineer information pertaining to each vehicle for which a license has been issued including make, model, year, and state license number.

**Sec. 126-117. Compliance required.**

(a) Every driver licensed under this article shall comply with all city, state and federal laws. Failure to do so will justify suspension or revocation of his or her license.

(b) Any vehicle operated under the provisions of this article shall comply with

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all applicable requirements of the state motor vehicle code or other state and city laws.

- ⊗(c) Any vehicle operated under the provisions of this article shall be inspected quarterly by the holder of the certificate to ensure compliance to all applicable requirements of the state motor vehicle code or state and city laws.

**Sec. 126-152. Misrepresentation or fraud in securing certificate or license.**

- ⊗ No person shall give any false or fictitious information on any application for any certificate or license provided for in this article or practice any fraud or misrepresentation in any manner to secure a certificate or license.

**Sec. 126-154. Criminal or civil penalties.**

- ⊗(a) Any person, firm, or corporation who fails to perform an act required by the provisions of this article, or who commits an act prohibited by the provisions of this article, shall be guilty of a misdemeanor punishable by fine or imprisonment as provided by section 1-15 of this Code, or shall be guilty of a municipal infraction punishable by a civil penalty as provided by section 1-15 of this Code.
- ⊗(b) Upon issuance of any citation or charge under this article, the issuing agency shall deliver a copy of the citation to the city prosecutor and the traffic engineer.



Date Sept. 27, 2010

Agenda Item 47B

Roll Call # \_\_\_\_\_

# Paratransit Company Application -

August 16  
2010

Statement: I, Michael R. Berry, Traffic Facilities Administrator with the City of Des Moines, Engineering Department, Traffic & Transportation Division, certify that I have prepared the preceding "Limousine Company Application Checklist." The attached documents that have had information blocked out, have had that information removed for identity theft protection of the applicant and others referenced by the applicant and to protect confidential records under Iowa Code Chapter 22. The original documents are on file with the Traffic Engineers Office and the entire document(s) may be reviewed by anyone with the provisions of Iowa Code Chapter 22.

Joy-Ride  
Transport,  
LLC

*Michael R. Berry* 8-16-10

August 16, 2010

Michael R. Berry, Traffic Facilities Administrator, City of Des Moines



*Christopher C. Coco*  
8/16/2010

# KROLL

Date Requested : 01-Jul-2010  
05:35:27 PM  
CST  
Reference Number : 9763036

## CLIENT INFORMATION

Client : Joy Ride Transport, LLC  
Address : PO Box 1107  
Waukee, IOWA 50263  
Phone : 515-987-9992

Acct No : 69822

## SUBJECT INFORMATION

Title :  
Name : Cochran, Bethany Michelle  
Name Suffix:  
Address : 1580 SE Bristol Drive  
Waukee, IOWA 50263

SSN: XXX-XX-1728  
Date of Birth : 05/24/XXXX  
Gender : Female

Package Ordered: (No package ordered)

## SERVICES ORDERED

Service Name	Location	Name Searched	Status	Alert	Disposition
Statewide Criminal Record Search	IA	Cochran, Bethany	QA'd		

QA : Kroll Employee

Status : QA

QA Date : 15-Jul-2010 02:16 PM CST

## Statewide Criminal Record Search

QA'd as of 15-Jul-2010 02:15 PM CST

Name Searched: Cochran, Bethany Michelle  
Alias Searched: Baker, Bethany  
Search Period: 07/15/2003 - 07/15/2010  
State: IA  
Source Searched: IA DIVISION OF CRIMINAL INVESTIGATION  
Remarks: NO RECORDS FOUND

### Notice :

The information contained herein should not be the sole determinant in an evaluation of the above-listed individual.

**THIS REPORT IS SUBMITTED IN STRICT CONFIDENCE AND EXCEPT WHERE REQUIRED BY LAW, NO INFORMATION PROVIDED IN THIS REPORT MAY BE REVEALED DIRECTLY OR INDIRECTLY TO ANY PERSON EXCEPT TO ONE WHOSE OFFICIAL DUTIES REQUIRE THEM TO PASS ON THE TRANSACTION IN RELATION TO WHICH THIS REPORT WAS ORDERED.**

The information provided herein shall not be construed to constitute a legal opinion; rather it is a compilation of public records/data for your review.

Kroll Background America searched the public record source for the above listed information limited to the stated searched period. The records are differentiated at the source by one or all of the following identifiers: name, address, date of birth, national insurance number, nationality and/or gender. The accuracy of the results may be affected without one or more of these identifiers.





# CITY OF DES MOINES

## APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE

Name Cochran Bellamy Michelle  
(Last) (First) (Middle)

Address 1580 SE Bristol Drive  
Waukee, IA 50263 515-974-3750  
(City, State & Zip Code) (Phone Number)

Birth Date: [REDACTED] DL # [REDACTED] SS# [REDACTED] Class: D Exp. Date: \_\_\_\_\_

Weight: [REDACTED] Height: [REDACTED] Color of Hair: brunette Color of Eyes: brown

Have you ever been licensed as a City of Des Moines Taxi/Limo Driver? No When? NA

Years of experience driving an automobile. 13 Taxi/Limo: none

Have you ever had your driver's license suspended/revoked? NO If so, when? N/A

Give reason(s) for suspension/revocation. n/a

List all convictions for traffic violations for which your license was suspended/revoked during the last five (5) years.

None

List all convictions for criminal offenses other than traffic offenses during the last ten (10) years. None

### EMPLOYMENT RECORD:

EMPLOYMENT RECORD:			EDUCATION RECORD:	
From	To	Employer's Name and Address	School	Circle Highest Grade Completed
April 2010	present	City Ride Transport PO Box 1107 Waukee, IA 50263		
Nov 2009	April 2010	Crystal Clear 2300 Westown Parkway, Waukee, IA 50263	Elementary	1 2 3 4 5 6 7 8
March 2007	Nov. 2009	IA Hospice 5050 NW Johnston Dr Johnston, IA 50131	High School	9 10 11 12
			College	1 2 3 4 5 6
			Trade School Other	1 2 3 4

### HEALTH RECORD:

List any physical impairments or disability that would affect your ability to drive. None

List any current medications or medical conditions for the past five (5) years which might affect your ability to drive:

None

City of Des Moines  
Traffic and Transportation

APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE IN THE CITY OF DES MOINES

Page 2

REFERENCED (you for at least one year):

1. Name

Phone No.

Address

2. Name

Address

3. Name

Address

I hereby agree that if a license to drive a Taxicab/Limousine is issued to me that I will conform with all ordinances, rules and regulations governing Taxicab/Limousines and their drivers of the City of Des Moines.

I hereby swear that I am the individual making the foregoing application for a Taxicab/Limousine License and that the answers to the foregoing questions and other statements contained herein are true to the best of my knowledge and belief.

7/18/10  
(Date)

*[Signature]*  
(Applicant's Signature)

Having been duly designated by the Chief of Police of the City of Des Moines for the purpose, I hereby certify that I have examined the applicant's arrest and traffic records. After careful examination, I hereby recommend that the applicant's request for a license to drive a Taxicab/Limousine be:

APPROVED

REJECTED

8/11/10  
(Date)

*[Signature]* 4810  
(Authorized Representative, Chief of Police)

Receipt Number: \_\_\_\_\_

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Badge Number: \_\_\_\_\_

Company: \_\_\_\_\_

Owner: \_\_\_\_\_

REJECTED

Application for License  APPROVED

(Date)

(City Traffic Engineer)

Department of  
**IOWA REVENUE**

Your Iowa Business Tax Registration has been successfully submitted. Please print this page for your records.

Within 4-6 weeks, you will receive in the mail:

- Your Business eFile Number (BEN) letter, which gives you access to file through eFile & Pay
- Sales Tax: A postcard with your permit number
- Retailer's Use or Consumer's Use Tax: A letter with your permit number

A tax return must be filed even if you had no activity or no tax due.

Press Ctrl + P to print

**IOWA BUSINESS TAX REGISTRATION FORM**

**BUSINESS INFORMATION**

**Legal Name:** Joy Ride Transport, LLC

**Trade Name:** Joy Ride Transport

**Location:** 1580 SE Bristol Drive, Waukée, IA 50263

**County:** Dallas - 25

**Phone1:** 515 937 9992

**Phone2:**

**Fax:** 515 981 7281

**Activity:** Non-Emergency Transportation

**Prev Owner:**

**BUSINESS OWNERSHIP**

**Ownership:** Limited Liability Company

**BUSINESS DETAILS**

**Fed ID:** 27 2097962

**Established On:** 03/11/10

**Established In:** IA

**Owners, Partners, Officers and/or Responsible Parties**

- Name:** Balthary Cochran  
**SSN:** [REDACTED]
- Name:** Ted Cochran  
**SSN:** [REDACTED]
- Name:** [REDACTED]

**SALES DEPENDENT TAXES**

**HOTEL/MOTEL TAX**  
Permit? Not Needed

**AUTOMOBILE RENTAL TAX**  
Permit? Not Needed

**HOUSEHOLD HAZARDOUS MATERIAL**  
Permit? Not Needed

**CONSUMER'S USE TAX**  
Permit? Not Needed

**WITHHOLDING TAX**  
Permit? Not Needed

**CORPORATION/PARTNERSHIP INCOME TAX**

Permit? Not Needed

**SIGNATURE**

**Full Name:** Ted Wayne Cochran

**SSN:** [REDACTED]

**Date:** 3/5/2010



Berry, Mike R.

**From:** Berry, Mike R.  
**Sent:** Tuesday, August 10, 2010 12:49 PM  
**To:** 'Christopher James'  
**Subject:** RE: Joy Ride Transport Final Items

Chris,

I wanted to just quickly acknowledge receipt of these last three documents and pass on a little procedural information.

I have sent a small packet over to the DMPD for investigation, in accordance with §126-184. I would look for that to come back by the start of next week (to expedite the process I e-mailed the packet as well as sending the hard copies by inter-office mail).

Once I have that information back I will go through the packet and pull those items that are necessary for inclusion when submitted to the City Council – then I will make copies of them and redact any specific identifying numbers or items that could create a problem with identification theft (birthdays, drives license numbers, etc.) and will prepare the checklist with my comments indicating that specific items have been turned into this office. I keep in mind that anything that I send to the City Clerk’s Office becomes a public document. While I have no concern about letting the public know- I want to make sure that the need to know is balanced with the individual’s right to protect their information from any kind of potential theft.

Then the packet goes to the City Council. Looking at the City Council schedule we are lined up for the first meeting, to set the hearing date, being the 13<sup>th</sup> of September. The hearing date is usually the following Council meeting, which is the 27<sup>th</sup>. The meeting of the 27<sup>th</sup> would be the one that you (and Ms. Cochran ?) should plan to attend. It is very rare to have any controversy – but if there are any questions it is always best to have someone there to answer. Usually, at the first meeting the agenda item is passed on the consent agenda. For the second council meeting it would fall into the Hearing section of the agenda.

I’ll keep you posted on any progress.

I appreciate the thoroughness that you and your client have shown in the preparation of your packet.

Thanks,

Mike Berry



Traffic Facilities Administrator

Michael R. Berry



Berry, Mike R.

**From:** Berry, Mike R.  
**Sent:** Tuesday, August 10, 2010 12:49 PM  
**To:** West, Mike D.  
**Subject:** RE: Transmittal of Request for Investigation of Applicant for a Para-Transit Co License; Joy Ride Transportation LLC under §126-184

Thanks Mike.

Mike B


*Mike R. Berry*

Traffic Facilities Administrator

Michael R. Berry  
City of Des Moines  
Engineering Department  
Traffic & Transportation Division  
600 E. Court Avenue, Suite #200  
Des Moines, IA 50309  
(515) 283-4973  
FAX (515) 237-1640

All-America City  
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**From:** West, Mike D.  
**Sent:** Tuesday, August 10, 2010 12:48 PM  
**To:** Berry, Mike R.  
**Subject:** RE: Transmittal of Request for Investigation of Applicant for a Para-Transit Co License; Joy Ride Transportation LLC under §126-184

Mike,

I did a review of Ms Cochran and she checks out good. I will send back the copy signed when I receive it.

Thanks,  
Mike West



---

**From:** Berry, Mike R.

**Sent:** Tuesday, August 10, 2010 11:27 AM

**To:** West, Mike D.

**Subject:** Transmittal of Request for Investigation of Applicant for a Para-Transit Co License; Joy Ride Transportation LLC under §126-184

Mike,

Here is an electronic copy of a Para-Transit Company application that I have received, for PD's investigation.

I have put the hard-copy in the inter-office mail. There is really no difference from the review that you do for a Taxi Company.

Thanks,

Mike Berry

<< File: Joy Ride Transportation - Para-Transit Co.pdf >>

<< OLE Object: Picture (Device Independent Bitmap) >>

**Traffic Facilities Administrator**

Michael R. Berry

City of Des Moines

Engineering Department

Traffic & Transportation Division

600 E. Court Avenue, Suite #200

Des Moines, IA 50309

(515) 283-4973


FAX (515) 237-1640

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<< OLE Object: Picture (Device Independent Bitmap) >>      << OLE Object: Picture (Device Independent Bitmap) >>

<< OLE Object: Picture (Device Independent Bitmap) >>

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# Joy & Ride

T E S T I N G







515-987-9992

**Joy & Ride**

NON-EMERGENCY TRANSPORTATION SERVICES

2027004



**Joy  Ride**

**Joy Ride Transport, LLC**

**Van #: JR01**

**515-987-9992**

47B



# CERTIFICATE OF LIABILITY INSURANCE

OP ID DM

DATE (MM/DD/YYYY)

08/05/10

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b>  Two Rivers Insurance-Waukee 225 NE Dartmoor Drive, Ste 100 Waukee IA 50263 Phone:515-987-7888 Fax:515-987-2575	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: <b>JOYRI-1</b>	
	INSURER(S) AFFORDING COVERAGE	NAIC #
<b>INSURED</b>  Joy Ride Transport, LLC Ted Cochran P.O.Box 1107 Waukee IA 50263	INSURER A: <b>Bershire Hathaway</b>	
	INSURER B: <b>Scottsdale Insurance Company</b>	
	INSURER C: <b>Liberty Mutual</b>	
	INSURER D:	
	INSURER E:	
	INSURER F:	

**COVERAGES**

**CERTIFICATE NUMBER:**

**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY			CPS1238386.	06/21/10	06/21/11	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
A	AUTOMOBILE LIABILITY			IAA100018	06/10/10	06/10/11	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						\$
<input type="checkbox"/> NON-OWNED AUTOS			\$				
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			XLS0067812	06/21/10	06/21/11	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DEDUCTIBLE						\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000						\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			10182896333	07/02/10	07/02/11	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				E.L. EACH ACCIDENT \$ 100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 100,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 30 days notice of cancellation, non-renewal or reduction in insurance coverage or limits and 10 days notice for nonpayment by registered mail to the City of Des Moines Traffic Engineer.

**CERTIFICATE HOLDER**

**CANCELLATION**

CITY OF D	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
City of Des Moines 400 Robert D. Ray Drive Des Moines IA 50309	AUTHORIZED REPRESENTATIVE Tim Brunkhorst

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47B

CITY OF DES MOINES  
Office of  
TRAFFIC AND TRANSPORTATION

TO: Judy Bradshaw  
Chief of Police

DATE: July 28, 2010

FROM: Mike Berry  
Parking Facilities Administrator

SUBJECT: Review for Approval; Daily Trip  
Card – Applicant Joy Ride LLC.

In accordance with the requirements of §126-150 (a) the attached Daily Trip Card, submitted by Joy Ride, LLC., with their application for a License to operate a Paratransit Company in the City of Des Moines, is submitted for review.

Please return this documentation indicating whether this Daily Trip Card format is acceptable (see below).

Thank you.

Michael R. Berry  
Traffic Facilities Administrator

Encl.

---

Des Moines Police Department  
Chief of Police

Date: \_\_\_\_\_

Enclosed Daily Trip Card Format, submitted by Joy Ride LLC is:

Approved

Disapproved

---

Judy Bradshaw  
Chief of Police





Berry, Mike R.

---

**From:** Buzynski, Mark J.  
**Sent:** Friday, July 30, 2010 2:44 PM  
**To:** Berry, Mike R.  
**Subject:** FW: Paratransit Company Trip Card - Chief of Police Approval  
**Attachments:** Memo to Chief of Police approve Daily Trip Card Joy Ride.pdf - Adobe Acrobat Professional.pdf; ATT00001..htm; ATT00002..htm; ATT00003..htm; ATT00004..htm; ATT00005..htm

Mike,

This has been approved. Let me know if you need anything further.

Mark J. Buzynski  
 Lieutenant, Commanding  
 DMPD Traffic Unit  
 Office: 515-271-4651

---

**From:** O'Donnell, James M.  
**Sent:** Friday, July 30, 2010 2:31 PM  
**To:** Kingery, Anna L.; Buzynski, Mark J.  
**Cc:** Waymire, Steve M.  
**Subject:** Fwd: Paratransit Company Trip Card - Chief of Police Approval

TCO

Mark:  
 Please send to Mike.

Sent from my iPad

Begin forwarded message:

**From:** "Buzynski, Mark J." <MJBuzynski@dmgov.org>  
**To:** "O'Donnell, James M." <JMODOdonnell@dmgov.org>, "Waymire, Steve M." <SMWaymire@dmgov.org>  
**Subject:** FW: Paratransit Company Trip Card - Chief of Police Approval

A/C,

Officer West has reviewed the Trip Card and it complies with all the information that is needed to transport a customer.

---

From: O'Donnell, James M.  
 Sent: Wednesday, July 28, 2010 3:52 PM  
 To: Buzynski, Mark J.  
 Subject: FW: Paratransit Company Trip Card - Chief of Police Approval

Do you know what this is all about?

---

From: Kingery, Anna L.  
Sent: Wednesday, July 28, 2010 3:43 PM  
To: O'Donnell, James M.  
Subject: FW: Paratransit Company Trip Card - Chief of Police Approval

Please handle through your division.

Judy A. Bradshaw  
Chief of Police

---

From: Berry, Mike R.  
Sent: Wednesday, July 28, 2010 3:32 PM  
To: Kingery, Anna L.  
Subject: Paratransit Company Trip Card - Chief of Police Approval

Anna,

I have attached another trip card that requires the approval of the Chief of Police (§126-150(a)). I would appreciate it if you could have the Chief or their representative review and send it back to me.

Thanks,

Mike Berry

Traffic Facilities Administrator

Michael R. Berry  
City of Des Moines  
Engineering Department  
Traffic & Transportation Division  
600 E. Court Avenue, Suite #200  
Des Moines, IA 50309  
(515) 283-4973  
FAX (515) 237-1640

All-America City  
1949 1976 1981 2003 2010

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The sender does not accept liability for any error or omission in the contents of this message which may arise as a result of errors in e-mail transmission.



### SERVICE RATES

#### Base fares for one way trip

*Charged during regular business hours (7AM until 6PM)*

<u>Service</u>	<u>Rate</u>
Wheelchair	\$40.00
Hourly Wait Time Charge *	\$40.00
Loaded Mileage **	\$3.00
Unloaded Mileage ***	\$1.00

\* Hourly wait time is charged after 30 minutes

\*\* Loaded mileage is charged per mile for miles 16 and above

\*\*\* Unloaded mileage is charged when traveling over 15 miles from office to pickup area

#### Premium Rates charged for one way trip

*Charged Saturdays and Sundays, Weekdays from 6PM to 7AM and Holidays.*

<u>Service</u>	<u>Rate</u>
Wheelchair	\$45.00
Hourly Wait Time Charge *	\$50.00
Loaded Mileage **	\$3.75
Unloaded Mileage ***	\$1.25

\* Hourly wait time is charged after 30 minutes

\*\* Loaded mileage is charged per mile for miles 16 and above

\*\*\* Unloaded mileage is charged when traveling over 15 miles from office to pickup area

Should there be a need to cancel transportation, call us and cancel within 12 hours of your scheduled pick up time. If our vehicle arrives at your facility and you decline the trip, you will be charged a cancellation fee.

*Negotiable rates for recurrent clients and long distance transportation.*





# CITY OF DES MOINES

## APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE

Name Baker Diane D  
(Last) (First) (Middle)

Address 7023 Sharon Dr  
Urbandale, IA 50322  
(City, State & Zip Code) (Phone Number)

Birth Date [REDACTED] DL # [REDACTED] SSN [REDACTED] Class: D Exp. Date: [REDACTED]

Weight: [REDACTED] Height: [REDACTED] Color of Hair: Blond Color of Eyes: Green

Have you ever been licensed as a City of Des Moines Taxi/Limo Driver? NO When? \_\_\_\_\_

Years of experience driving an automobile. 37 Taxi/Limo: -

Have you ever had your driver's license suspended/revoked? NO If so, when? -

Give reason(s) for suspension/revocation. \_\_\_\_\_

List all convictions for traffic violations for which your license was suspended/revoked during the last five (5) years. \_\_\_\_\_

List all convictions for criminal offenses other than traffic offenses during the last ten (10) years. \_\_\_\_\_

### EMPLOYMENT RECORD:

From	To	Employer's Name and Address
1973	2006	Quest Communications
2009	present	Mercy Clinics

### EDUCATION RECORD:

School	Circle Highest Grade Completed
Elementary	1 2 3 4 5 6 7 8 <u>9</u>
High School	9 10 11 12 <u>12</u>
College	<u>1</u> 2 3 4 5 6
Trade School	1 2 3 4
Other	

### HEALTH RECORD:

List any physical impairments or disability that would affect your ability to drive. \_\_\_\_\_

List any current medications or medical conditions for the past five (5) years which might affect your ability to drive: \_\_\_\_\_





City of Des Moines  
Traffic and Transportation

APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE IN THE CITY OF DES MOINES

Page 2

REFERENCES (persons known by you for at least one year):

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]

I hereby agree that if a license to drive a Taxicab/Limousine is issued to me that I will conform with all ordinances, rules and regulations governing Taxicab/Limousines and their drivers of the City of Des Moines.

I hereby swear that I am the individual making the foregoing application for a Taxicab/Limousine License and that the answers to the foregoing questions and other statements contained herein are true to the best of my knowledge and belief.

6/23/10 Deane W. Baker  
(Date) (Applicant's Signature)

Having been duly designated by the Chief of Police of the City of Des Moines for the purpose, I hereby certify that I have examined the applicant's arrest and traffic records. After careful examination, I hereby recommend that the applicant's request for a license to drive a Taxicab/Limousine be:

APPROVED  REJECTED

\_\_\_\_\_  
(Date) (Authorized Representative, Chief of Police)

Receipt Number: \_\_\_\_\_  
Date: \_\_\_\_\_  
Amount: \_\_\_\_\_  
Badge Number: \_\_\_\_\_  
Company: \_\_\_\_\_  
Owner: \_\_\_\_\_

REJECTED  
Application for License  APPROVED  
\_\_\_\_\_  
(Date) (City Traffic Engineer)

47B

# KROLL

Date Requested : 01-Jul-2010  
05:37:11 PM  
CST

Reference Number : 9763038

## CLIENT INFORMATION

Client : Joy Ride Transport, LLC  
Address : PO Box 1107  
Waukee, IOWA 50263  
Phone : 515-987-9992

Acct No : 69822

## SUBJECT INFORMATION

Title :  
Name : Baker, Diane Denise  
Name Suffix:  
Address : 7023 Sharon Drive  
Urbandale, IOWA 50322

SSN: XXX-XX-0382  
Date of Birth : 11/19/XXXX  
Gender : Female

Package Ordered: (No package ordered)

## SERVICES ORDERED

Service Name	Location	Name Searched	Status	Alert	Disposition
Statewide Criminal Record Search	IA	Baker, Diane	QA'd		

QA : Kroll Employee

Status : QA

QA Date : 21-Jul-2010 08:42 AM CST

QA'd as of 21-Jul-2010 08:41 AM CST

## Statewide Criminal Record Search

Name Searched: Baker, Diane Denise  
Search Period: 07/20/2003 - 07/20/2010  
State: IA  
Source Searched: IA DIVISION OF CRIMINAL INVESTIGATION  
Remarks: NO RECORDS FOUND

### Notice :

The information contained herein should not be the sole determinant in an evaluation of the above-listed individual.

**THIS REPORT IS SUBMITTED IN STRICT CONFIDENCE AND EXCEPT WHERE REQUIRED BY LAW, NO INFORMATION PROVIDED IN THIS REPORT MAY BE REVEALED DIRECTLY OR INDIRECTLY TO ANY PERSON EXCEPT TO ONE WHOSE OFFICIAL DUTIES REQUIRE THEM TO PASS ON THE TRANSACTION IN RELATION TO WHICH THIS REPORT WAS ORDERED.**

The information provided herein shall not be construed to constitute a legal opinion; rather it is a compilation of public records/data for your review.

Kroll Background America searched the public record source for the above listed information limited to the stated searched period. The records are differentiated at the source by one or all of the following identifiers: name, address, date of birth, national insurance number, nationality and/or gender. The accuracy of the results may be affected without one or more of these identifiers.



# CITY OF DES MOINES

## APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE

Name COCHRAN TEO Wayne  
(Last) (First) (Middle)

Address 1580 SE BRISTOL DRIVE  
Waukee, IA 50263  
(City, State & Zip Code) (Phone Number)

Birth Date [REDACTED] DL# [REDACTED] SS# [REDACTED] Class: [REDACTED] Exp. Date [REDACTED]

Weight: [REDACTED] Height: [REDACTED] Color of Hair: Brown Color of Eyes: Hazel

Have you ever been licensed as a City of Des Moines Taxi/Limo Driver? NO When? -

Years of experience driving an automobile. 16 Taxi/Limo: -

Have you ever had your driver's license suspended/revoked? NO If so, when? -

Give reason(s) for suspension/revocation. -

List all convictions for traffic violations for which your license was suspended/revoked during the last five (5) years.

List all convictions for criminal offenses other than traffic offenses during the last ten (10) years.

### EMPLOYMENT RECORD:

EMPLOYMENT RECORD:			EDUCATION RECORD:	
From	To	Employer's Name and Address	School	Circle Highest Grade Completed
2008	2010	My Angel Foundation Waukee, IA	School	
2007	2008	COS GLOBAL Des Moines, IA	Elementary	1 2 3 4 5 6 7 8
2005	2007	Nationwide Document Solutions Urbandale, IA	High School	9 10 11 12
			College	1 2 3 4 5 6
			Trade School	1 2 3 4
			Other	

### HEALTH RECORD:

List any physical impairments or disability that would affect your ability to drive. None

List any current medications or medical conditions for the past five (5) years which might affect your ability to drive:

City of Des Moines  
Traffic and Transportation

APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE IN THE CITY OF DES MOINES

Page 2

REFERENCES (persons known by you for at least one year):

- 1.
- 2.
- 3.

I hereby agree that if a license to drive a Taxicab/Limousine is issued to me that I will conform with all ordinances, rules and regulations governing Taxicab/Limousines and their drivers of the City of Des Moines.

I hereby swear that I am the individual making the foregoing application for a Taxicab/Limousine License and that the answers to the foregoing questions and other statements contained herein are true to the best of my knowledge and belief.

07/01/12 \_\_\_\_\_  
(Date) (Applicant's Signature)

Having been duly designated by the Chief of Police of the City of Des Moines for the purpose, I hereby certify that I have examined the applicant's arrest and traffic records. After careful examination, I hereby recommend that the applicant's request for a license to drive a Taxicab/Limousine be:

APPROVED  REJECTED

\_\_\_\_\_  
(Date) (Authorized Representative, Chief of Police)

Receipt Number: \_\_\_\_\_

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Badge Number: \_\_\_\_\_

Company: \_\_\_\_\_

Owner: \_\_\_\_\_

REJECTED  
Application for License  APPROVED

\_\_\_\_\_  
(Date) (City Traffic Engineer)



# KROLL

Date Requested : 01-Jul-2010  
05:30:13 PM  
CST  
Reference Number : 9763027

## CLIENT INFORMATION

Client : Joy Ride Transport, LLC  
Address : PO Box 1107  
Waukee, IOWA 50263  
Phone : 515-987-9992

Acct No : 69822

## SUBJECT INFORMATION

Title :  
Name : Cochran, Theodore Wayne  
Name Suffix:  
Address : 1580 SE Bristol Drive  
Waukee, IOWA 50263

SSN: XXX-XX-2960  
Date of Birth : 05/05/XXXX  
Gender : Male

Package Ordered: (No package ordered)

## SERVICES ORDERED

Service Name	Location	Name Searched	Status	Alert	Disposition
Statewide Criminal Record Search	IA	Cochran, Theodore	QA'd		

QA : Kroll Employee

Status : QA

QA Date : 15-Jul-2010 02:16 PM CST

## Statewide Criminal Record Search

QA'd as of 15-Jul-2010 02:15 PM CST

Name Searched: Cochran, Theodore Wayne  
Search Period: 07/15/2003 - 07/15/2010  
State: IA  
Source Searched: IA DIVISION OF CRIMINAL INVESTIGATION  
Remarks: NO RECORDS FOUND

### Notice :

The information contained herein should not be the sole determinant in an evaluation of the above-listed individual.

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47B

## PASSENGER VEHICLE DELIVERY RECEIPT

**Customer:** Joy Ride Transport, LLC    **Ted Cochran**  
**Address:** , ,  
**Vehicle:** 2009 DODGE GRAND CARAVAN SE

**Purchase date:** 6/10/2010  
**Conversion:** NR-New Rear Entry  
**VIN:** [REDACTED]

It is hereby acknowledged that use of the equipment and/or vehicle modifications identified below have been demonstrated and explained fully to the person named above who may use/operate the vehicle and its equipment. It is further acknowledged that any and all other persons who may use/operate the vehicle/equipment have been or will be trained in and are or will be able to operate the vehicle and all installed equipment in a safe and efficient manner in accordance with the instructions provided. It is acknowledged that an Owner's Manual has been provided and reviewed with respect to the equipment indicated below.

Equipment List	Installed / Familiarized (initial)	Manual	Maintenance Schedule*
# Keys <u>2</u> # Remotes <u>2</u>	✓		Replace battery annually
Vehicle Owner's manual	✓	present	n/a
Lowered floor	✓		every 5,000 miles for 6 months inspect undercarriage or damage
Emergency door and ramp operation	✓		inspect every 6 months
Sliding door operation	✓		every 3,000 miles or 3 months lube door track
Ramp operation (power or manual)	✓		every 3,000 miles or 3 months lubricate hinges
Wheelchair tie down operation	✓		n/a
Conversion Owner's manual	✓	present	n/a
Tie down set w/ seatbelt extension			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions

\* The above mentioned Maintenance intervals are recommendations. Specific information given in the owner's manuals provided by the manufacturer may supersede the above recommendations. It is extremely important that all inspections for the equipment be followed to enhance the safe operation of the vehicle. Please contact the manufacturer(s) of the equipment listed above for additional information regarding the safe use and operation of any equipment installed on your vehicle.

**WARNING: Failure to follow the instructions provided herein can result in an accident, personal injury or death!**

It is acknowledged that this vehicle has been modified to meet the specific needs of the purchaser and may not handle, turn, accelerate, or stop in the same manner as an unmodified vehicle. For example, additional time and distance may be required for accelerating or stopping, and maneuvers must be executed at a lower rate of speed. For this reason, only properly trained persons should use or operate the vehicle and its equipment, and only in strict accordance with the instructions provided.

It is acknowledged that the use of available wheelchair tie-downs, seatbelts and shoulder harnesses by all operators and occupants of the vehicle is mandatory when the vehicle is in motion.

It is acknowledged that it may be dangerous to use this vehicle and/or the installed equipment without complying fully with the instructions in the applicable Owner's Manuals and any and all additional instructions provided by personnel. Those persons not trained in the proper use and operation of the vehicle and/or installed equipment will not be permitted to use/operate the vehicle or equipment.

It is understood that any comments, questions or concerns with respect to the proper and safe use of the vehicle or its equipment may be addressed to Ed Stout, Quality Assurance/Shop Manager. It is understood that the vehicle and all equipment should be regularly maintained in accordance with applicable Owner's Manuals in order to enhance the proper/safe operation of the vehicle and its equipment. Preventative maintenance should be regularly performed. Under no circumstances should the vehicle or its equipment be modified without the prior written consent of Dealer.

**EXHIBIT**  
C



## PASSENGER VEHICLE DELIVERY RECEIPT

Customer: Ted Cochran \_\_\_\_\_

Purchase date: 6/10/2010 \_\_\_\_\_

Address: , , \_\_\_\_\_

Conversion: NR-New Rear Entry \_\_\_\_\_

Vehicle: 2009 DODGE GRAND CARAVAN SE \_\_\_\_\_

VIN: [REDACTED] \_\_\_\_\_

**PERSONAL MOBILITY DEVICE:**

It is hereby acknowledged that the subject vehicle has been modified to allow *only* the following mobility equipment (wheelchair or scooter) to be used:

Mobility Equipment: n/a  
 Type (wheelchair/scooter): \_\_\_\_\_  
 Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Serial Number: \_\_\_\_\_

**FACTORY VEHICLE CONTROLS**

I acknowledge that I understand operation of and/or have been shown the proper use of the factory vehicle controls listed below:

Headlights / Parking lights	✓	Fuel fill	✓
Windshield wipers / washer	✓	Heating and air conditioning	✓
Directionals	✓	Radio and CD	✓
Hazard lights	✓	Steering Tilt	✓
Cruise control	✓	Power window operation	✓
Gear shift	✓	Door operators side / rear	✓

**! WARNING:** Failure to follow the instructions provided herein can result in an accident, personal injury or death!

Your vehicle is equipped with a battery from the vehicle manufacturer. This battery is designed to operate under the electrical draw of a factory equipped vehicle. The modifications in your vehicle cause an additional "Key Off" draw on the battery. Excessive use of the installed mobility equipment between driving of the vehicle while the vehicle is not running, can result in excessive battery drain and a shortened battery life. Your vehicle should be driven 20 miles or more at least once a week to maintain the battery. A higher capacity battery can be purchased that would lengthen the time between drives. Contact your Dealer or local mechanic for guidance. Another option is to place your battery on a charger if you will not be using the vehicle for 10 days or more.

The customer expressly recognizes and agrees that there are risks inherent in the operation of this vehicle, and these risks are compounded in accordance with the nature and extent of your disability, training in the operation of this vehicle, your medication regimen, etc. By his/her purchase and use of this vehicle, the customer expressly, voluntarily and knowingly accepts, agrees and assumes these risks.

This Vehicle Delivery Sheet does not provide or establish any warranty. **ANY IMPLIED WARRANTY OR MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND ALL IMPLIED WARRANTIES ARISING FROM A COURSE OF DEALING, USE OF TRADE, BY STATUTE OR OTHERWISE, IS HEREBY DISCLAIMED.**

**\*\*WARRANTY WORK DOES NOT INCLUDE ROAD SERVICE OR PICK UP OR DELIVERY\*\***

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

Customer's Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_

Authorized Dealer Representative \_\_\_\_\_

Date \_\_\_\_\_

## PASSENGER VEHICLE DELIVERY RECEIPT

Customer: Joy Ride Transport, LLC    Ted Cochran

Purchase date: 6/10/2010

Address: , ,

Conversion: NR-New Rear Entry

Vehicle: 2009 DODGE GRAND CARAVAN SE

VIN: [REDACTED]

It is hereby acknowledged that use of the equipment and/or vehicle modifications identified below have been demonstrated and explained fully to the person named above who may use/operate the vehicle and its equipment. It is further acknowledged that any and all other persons who may use/operate the vehicle/equipment have been or will be trained in and are or will be able to operate the vehicle and all installed equipment in a safe and efficient manner in accordance with the instructions provided. It is acknowledged that an Owner's Manual has been provided and reviewed with respect to the equipment indicated below.

Equipment List	Installed / Familiarized (initial)	Manual	Maintenance Schedule*
# Keys 2    # Remotes 2	✓		Replace battery annually
Vehicle Owner's manual	✓	present	n/a
Lowered floor	✓		every 6,000 miles for 6 months inspect undercarriage or damage
Emergency door and ramp operation	✓		inspect every 6 months
Sliding door operation	✓		every 3,000 miles or 3 months lube door track
Ramp operation (power or manual)	✓		every 3,000 miles or 3 months lubricate hinges
Wheelchair tie down operation	✓		n/a
Conversion Owner's manual	✓	present	n/a
Tie down set w/ seatbelt extension			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions

\* The above mentioned Maintenance intervals are recommendations. Specific information given in the owner's manuals provided by the manufacturer may supercede the above recommendations. It is extremely important that all inspections for the equipment be followed to enhance the safe operation of the vehicle. Please contact the manufacturer(s) of the equipment listed above for additional information regarding the safe use and operation of any equipment installed on your vehicle.

**WARNING: Failure to follow the instructions provided herein can result in an accident, personal injury or death!**

It is acknowledge that this vehicle has been modified to meet the specific needs of the purchaser and may not handle, turn, accelerate, or stop in the same manner as an unmodified vehicle. For example, additional time and distance may be required for accelerating or stopping, and maneuvers must be executed at a lower rate of speed. For this reason, only properly trained persons should use or operate the vehicle and its equipment, an only in strict accordance with the instructions provided.

It is acknowledged that the use of available wheelchair tie-downs, seatbelts and shoulder harnesses by all operators and occupants of the vehicle is mandatory when the vehicle is in motion.

It is acknowledged that it may be dangerous to use this vehicle and/or the installed equipment without complying fully with the instructions in the applicable Owner's Manuals and any and all additional instructions provided by personnel. Those persons not trained in the proper use and operation of the vehicle and/or installed equipment will not be permitted to use/operate the vehicle or equipment.

It is understood that any comments, questions or concerns with respect to the proper and safe use of the vehicle or its equipment may be addressed to: Ed Stout, Quality Assurance/Shop Manager. It is understood that the vehicle and all equipment should be regularly maintained in accordance with applicable Owner's Manuals in order to enhance the proper/safe operation of the vehicle and its equipment. Preventative maintenance should be regularly performed. Under no circumstances should the vehicle or its equipment be modified without the prior written consent of Dealer.

47B

### PASSENGER VEHICLE DELIVERY RECEIPT

Customer: Ted Cochran \_\_\_\_\_

Purchase date: 6/10/2010 \_\_\_\_\_

Address: , , \_\_\_\_\_

Conversion: NR-New Rear Entry \_\_\_\_\_

Vehicle: 2009 DODGE GRAND CARAVAN SE \_\_\_\_\_

VIN: [REDACTED] \_\_\_\_\_

**PERSONAL MOBILITY DEVICE:**

It is hereby acknowledged that the subject vehicle has been modified to allow *only* the following mobility equipment (wheelchair or scooter) to be used

Mobility Equipment n/a

Type (wheelchair/scooter) \_\_\_\_\_

Make \_\_\_\_\_

Model \_\_\_\_\_

Serial Number \_\_\_\_\_

**FACTORY VEHICLE CONTROLS**

I acknowledge that I understand operation of and/or have been shown the proper use of the factory vehicle controls listed below:

Headlights / Parking lights	✓	Fuel fill	✓
Windshield wipers / washer	✓	Heating and air conditioning	✓
Directionals	✓	Radio and CD	✓
Hazard lights	✓	Steering Tilt	✓
Cruise control	✓	Power window operation	✓
Gear shift	✓	Door operators side / rear	✓

**WARNING:** Failure to follow the instructions provided herein can result in an accident, personal injury or death!

Your vehicle is equipped with a battery from the vehicle manufacturer. This battery is designed to operate under the electrical draw of a factory equipped vehicle. The modifications in your vehicle cause an additional "Key Off" draw on the battery. Excessive use of the installed mobility equipment between driving of the vehicle while the vehicle is not running, can result in excessive battery drain and a shortened battery life. Your vehicle should be driven 20 miles or more at least once a week to maintain the battery. A higher capacity battery can be purchased that would lengthen the time between drives. Contact your Dealer or local mechanic for guidance. Another option is to place your battery on a charger if you will not be using the vehicle for 10 days or more.

The customer expressly recognizes and agrees that there are risks inherent in the operation of this vehicle, and these risks are compounded in accordance with the nature and extent of your disability, training in the operation of this vehicle, your medication regimen, etc. By his/her purchase and use of this vehicle, the customer expressly, voluntarily and knowingly accepts, agrees and assumes these risks.

This Vehicle Delivery Sheet does not provide or establish any warranty **ANY IMPLIED WARRANTY OR MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND ALL IMPLIED WARRANTIES ARISING FROM A COURSE OF DEALING, USE OF TRADE, BY STATUTE OR OTHERWISE, IS HEREBY DISCLAIMED.**

**\*\*WARRANTY WORK DOES NOT INCLUDE ROAD SERVICE OR PICK UP OR DELIVERY\*\***

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

*Brenda Miller*

Authorized Dealer Representative \_\_\_\_\_ Date \_\_\_\_\_

Customer's Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_



## PASSENGER VEHICLE DELIVERY RECEIPT

Customer: Joy Ride Transport, LLC Ted Cochran

Purchase date: \_\_\_\_\_

Address: , , \_\_\_\_\_

Conversion: NS-New Side Entry

Vehicle: 2009 DODGE GRAND CARAVAN SE

VIN: [REDACTED]

It is hereby acknowledged that use of the equipment and/or vehicle modifications identified below have been demonstrated and explained fully to the person named above who may use/operate the vehicle and its equipment. It is further acknowledged that any and all other persons who may use/operate the vehicle/equipment have been or will be trained in and are or will be able to operate the vehicle and all installed equipment in a safe and efficient manner in accordance with the instructions provided. It is acknowledged that an Owner's Manual has been provided and reviewed with respect to the equipment indicated below

Equipment List	Installed / Familiarized (initial)	Manual	Maintenance Schedule*
# Keys 2 # Remotes 2	✓		Replace battery annually
Vehicle Owner's manual	✓	present	n/a
Lowered floor	✓		every 6,000 miles for 6 months inspect undercarriage or damage
Emergency door and ramp operation	✓		inspect every 6 months
Sliding door operation	✓		every 3,000 miles or 3 months lube door track
Ramp operation (power or manual)	✓		every 3,000 miles or 3 months lubricate hinges
Wheelchair tie down operation	✓		n/a
Conversion Owner's manual	✓	present	n/a
QRTs - Retracting Straps			see manufacturer's instructions
Seatbelt extension			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions
			see manufacturer's instructions

\* The above mentioned Maintenance intervals are recommendations. Specific information given in the owner's manuals provided by the manufacturer may supercede the above recommendations. It is extremely important that all inspections for the equipment be followed to enhance the safe operation of the vehicle. Please contact the manufacturer(s) of the equipment listed above for additional information regarding the safe use and operation of any equipment installed on your vehicle.

**WARNING: Failure to follow the instructions provided herein can result in an accident, personal injury or death!**

It is acknowledged that this vehicle has been modified to meet the specific needs of the purchaser and may not handle, turn, accelerate, or stop in the same manner as an unmodified vehicle. For example, additional time and distance may be required for accelerating or stopping, and maneuvers must be executed at a lower rate of speed. For this reason, only properly trained persons should use or operate the vehicle and its equipment, and only in strict accordance with the instructions provided.

It is acknowledged that the use of available wheelchair tie-downs, seatbelts and shoulder harnesses by all operators and occupants of the vehicle is mandatory when the vehicle is in motion.

It is acknowledged that it may be dangerous to use this vehicle and/or the installed equipment without complying fully with the instructions in the applicable Owner's Manuals and any and all additional instructions provided by personnel. Those persons not trained in the proper use and operation of the vehicle and/or installed equipment will not be permitted to use/operate the vehicle or equipment.

It is understood that any comments, questions or concerns with respect to the proper and safe use of the vehicle or its equipment may be addressed to Ed Stout, Quality Assurance/Shop Manager. It is understood that the vehicle and all equipment should be regularly maintained in accordance with applicable Owner's Manuals in order to enhance the proper/safe operation of the vehicle and its equipment. Preventative maintenance should be regularly performed. Under no circumstances should the vehicle or its equipment be modified without the prior written consent of Dealer.

## PASSENGER VEHICLE DELIVERY RECEIPT

Customer: Ted Cochran

Purchase date: \_\_\_\_\_

Address: , , \_\_\_\_\_

Conversion: NS-New Side Entry

Vehicle: 2009 DODGE GRAND CARAVAN SE

VIN: [REDACTED]

**PERSONAL MOBILITY DEVICE:**

It is hereby acknowledged that the subject vehicle has been modified to allow *only* the following mobility equipment (wheelchair or scooter) to be used:

Mobility Equipment: n/a  
 Type (wheelchair/scooter): \_\_\_\_\_  
 Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Serial Number: \_\_\_\_\_

**FACTORY VEHICLE CONTROLS**

I acknowledge that I understand operation of and/or have been shown the proper use of the factory vehicle controls listed below:

Headlights / Parking lights	✓	Fuel fill	✓
Windshield wipers / washer	✓	Heating and air conditioning	✓
Directionals	✓	Radio and CD	✓
Hazard lights	✓	Steering Tilt	✓
Cruise control	✓	Power window operation	✓
Gear shift	✓	Door operators side / rear	✓

**I WARNING: Failure to follow the instructions provided herein can result in an accident, personal injury or death!**

Your vehicle is equipped with a battery from the vehicle manufacturer. This battery is designed to operate under the electrical draw of a factory equipped vehicle. The modifications in your vehicle cause an additional "Key Off" draw on the battery. Excessive use of the installed mobility equipment between driving of the vehicle while the vehicle is not running, can result in excessive battery drain and a shortened battery life. Your vehicle should be driven 20 miles or more at least once a week to maintain the battery. A higher capacity battery can be purchased that would lengthen the time between drives. Contact your Dealer or local mechanic for guidance. Another option is to place your battery on a charger if you will not be using the vehicle for 10 days or more.

The customer expressly recognizes and agrees that there are risks inherent in the operation of this vehicle, and these risks are compounded in accordance with the nature and extent of your disability, training in the operation of this vehicle, your medication regimen, etc. By his/her purchase and use of this vehicle, the customer expressly, voluntarily and knowingly accepts, agrees and assumes these risks.

This Vehicle Delivery Sheet does not provide or establish any warranty. **ANY IMPLIED WARRANTY OR MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND ALL IMPLIED WARRANTIES ARISING FROM A COURSE OF DEALING, USE OF TRADE, BY STATUTE OR OTHERWISE, IS HEREBY DISCLAIMED.**

**\*\*WARRANTY WORK DOES NOT INCLUDE ROAD SERVICE OR PICK UP OR DELIVERY\*\***

Customer Signature

Date

Customer's Authorized Representative

Date

Authorized Dealer Representative

Date

July '10

47B

CITY OF DES MOINES

---

JOY RIDE TRANSPORT, LLC	)	
	)	
	)	<b>APPLICATION FOR</b>
	)	<b>PARATRANSIT LICENSE</b>
	)	

---

COMES NOW Joy Ride Transport, LLC pursuant to City of Des Moines Municipal Code § 126-155 and does hereby apply for a license to operate as a paratransit service within the City of Des Moines and hereby states:

1. The name and address of the owner of Joy Ride Transport, LLC (“Company”) is as follows:
  - a. Bethany M. Cochran
  - b. 1580 SE Bristol Dr., Waukee, IA 50263
2. The Company has no plans to operate under a different trade name at this time.
3. Experience and Training.
  - a. Experience - Ms. Cochran has been a member of the healthcare community in the Des Moines area for over seven years and has seen the need for wheel chair transportation services expand beyond what the existing providers can manage. Her employment at nursing homes, hospice organizations, and area hospitals in Des Moines has provided her the experience required to perform the necessary duties that this company will require.
  - b. Training - Throughout her health services career she has assisted in the transportation of wheelchair-bound persons and has been in a position to learn the general care that a wheelchair-bound person requires.



Specifically, in regarding operation of para-transit vehicles, Ms. Cochran and all drivers have undergone thorough training with AMS Vans, Inc. This training consisted of step-by-step instructions on the use of each piece of equipment necessary to safely transport a wheelchair bound person. This training included both mechanical operation of the para-transit devices as well as safety concerns involved in transporting a wheel-chair bound person. Ms. Cochran and the drivers have been required to demonstrate their knowledge and ability to safely operate all equipment required to safely transport a wheelchair bound person.

4. The description of the paratransit taxicabs is as follows
  - √ a. 2009 Dodge Caravan SE - VIN [REDACTED] 523; Color - Red; Mileage - 31,809
  - √ b. 2009 Dodge Caravan SE - VIN [REDACTED] 950; Color- White; Mileage - 32,342
  - √ c. 2009 Dodge Caravan SE - VIN [REDACTED] 410; Color - White; Mileage - 35,422
  - d. The taxicabs will be new to the service of paratransit services. The taxicabs will be designated by the words Joy Ride Transportation. All taxicabs are properly equipped to safely transport wheelchair-bound persons. Logo is attached as Exhibit A.
5. That the location of the central operation of the business will be:
  - a. 1580 SE Bristol Dr., Waukee, IA 50263 - Dispatch Office.
  - b. The taxicabs that Joy Ride will operate will assist people with getting to medical appointments and other commitments. Customers will be

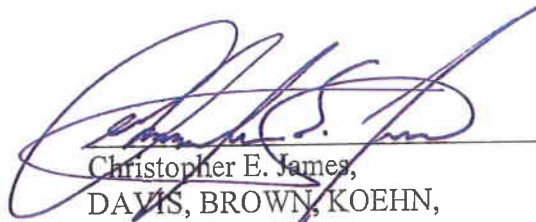
transported from nursing homes, senior communities or their independent living setting to their requested destination. As such, there will be no central operating location other than the dispatch office.

- 6. Other Required Information.
  - a. Driver License Applications - See **Exhibit B**.
  - b. Vehicle Compliance and Inspection - See **Exhibit C**.
  - c. Copies of Licensing Documents. At this time only a Iowa Department of Transportation Registration Number is required. The registration number for Joy Ride Transport, LLC is 2027004.
- 7. Schedule of Rates. See **Exhibit E**.
- 8. Copy of Driver's Trip Card. See **Exhibit F**.
- 9. Copy of Certificate of Insurance. See **Exhibit G**.
- 10. Joy Ride Transportation, LLC acknowledges the requirement to conspicuously display the vehicle license on the rear of each licensed vehicle in accordance with Des Moines Municipal Code § 126-188(b).
- 11. Joy Ride Transportation, LLC acknowledges the requirement for the driver of each licensed vehicle to conspicuously display their Taxicab Drivers License.
- 12. License Fees. A check is provided for the amount of \$475.00 which represents \$250.00 for the Annual License and \$75.00 for each of the Three (3) vehicles to be licensed.

WHEREFORE, Joy Ride Transportation, LLC requests that a paratransit license be granted for the City of Des Moines.

7/10

Respectfully Submitted,



Christopher E. James,  
DAVIS, BROWN, KOEHN,  
SHORS & ROBERTS, P.C.  
215 10th St., Ste. 1300  
Telephone: 515/246-7835  
Facsimile: 515/471-7835

ATTORNEY FOR JOY RIDE  
TRANSPORTATION, LLC.

47B



REPLY TO DES MOINES OFFICE

July 26, 2010

Via Hand Delivery

Mike Berry  
Des Moines Traffic and Transportation  
600 East Court Avenue  
Suite 200A  
Des Moines, IA 50309

RE: Joy Ride Transport, LLC

Dear Mr. Berry:

Per our conversation in late May after our first application for a paratransit license, please find the attached revised application for a paratransit license. I believe we have addressed all of the additional information required. Please let me know if you need anything more in order to process this application. Feel free to contact me at 515-246-7835 or via email at [ChrisJames@davisbrownlaw.com](mailto:ChrisJames@davisbrownlaw.com). Thank you for your attention to this matter.

Very truly yours,

DAVIS, BROWN, KOEHN, SHORS & ROBERTS, P.C.

Christopher E. James

Enclosures

#1843173  
DAVIS BROWN KOEHN SHORS & ROBERTS P.C.

John D. Shors  
Stephen W. Roberts  
William R. King  
Robert F. Holz, Jr.  
Robert A. Gamble  
Michael G. Kulik  
Frank J. Carroll  
Bruce I. Campbell  
Jonathan C. Wilson  
Steven L. Nelson  
David B. VanSickel  
Gene R. La Suer  
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Kent A. Herink  
Robert J. Douglas, Jr.  
Mark D. Walz  
Gary M. Myers  
Stanley J. Thompson  
David M. Erickson  
Lori Torgerson Chesser  
Jo Ellen Whitney  
Becky S. Knutson  
Julie Johnson McLean  
Beverly Evans  
Margaret Van Houten  
Thomas E. Stanberry  
Christopher P. Jannes  
Sharon K. Malheiro  
Kris Holub Tilley  
William A. Boatwright  
Thomas J. Houser  
Kendall R. Watkins  
Scott M. Brennan  
William E. Hanigan  
Debra Reetenbaugh Pettit  
Matthew E. Laughlin  
Judith R. Lynn Böes  
William P. Kelly  
Susan J. Freed  
Jason M. Ross  
Jason M. Stone  
Amy M. Landwehr  
John C. Pietila  
Emily E. Harris  
B. J. Miller  
Jodie Clark McDougal  
Jeffrey D. Ewoldt  
John S. Long  
Tara Z. Hall  
Charles N. Wittmack  
Courtney Strutt Todd  
Kelly A. Deters  
Amber K. Rutledge  
Nichole Miras Mordini  
Krystle L. Campa  
Sarah K. Franklin  
Victoria P. Nwasike  
M. Michelle Lickteig  
Christopher E. James  
Robert W. Dixon  
Mark D. Wickham  
Christopher S. Talcott  
Samuel P. Langholz  
Elizabeth R. Meyer  
Michele L. Warnock  
licensed in Illinois

Intellectual Property  
Kent A. Herink  
Emily E. Harris

Of Counsel  
Donald J. Brown  
Denise R. Claton  
C. Carleton Frederici  
A. J. Greffenius  
Dennis D. Jerde  
William J. Koehn  
Stephen M. Morain  
Joseph M. Pawlosky  
Richard E. Ramsay  
Thomas E. Salsbery  
Neal Smith  
William D. Thomas

A. Arthur Davis  
1928-1997





REPLY TO DES MOINES OFFICE

May 27, 2010

Via Hand Delivery

Mike Berry
Des Moines Traffic and Transportation
600 East Court Avenue
Suite 200A
Des Moines, IA 50309

RE: Joy Ride Transport, LLC

Dear Mr. Berry:

Per our conversation in late April, please find the attached application for a para-transit license filed pursuant to Sec. 126-155 of the municipal code. Please let me know if you need anything more in order to process this application. Feel free to contact me at 515-246-7835 or via email at ChrisJames@davisbrownlaw.com. Thank you for your attention to this matter.

Very truly yours,

DAVIS, BROWN, KOEHN, SHORS & ROBERTS, P.C.

Handwritten signature of Christopher E. James

Christopher E. James

Enclosures

- List of law firm attorneys including John D. Shors, Stephen W. Roberts, William R. King, Robert F. Holz, Jr., Robert A. Gamble, Michael G. Kulik, Frank J. Carroll, Bruce I. Campbell, Jonathan C. Wilson, Steven L. Nelson, David B. VanSickel, Gene R. La Suer, Deborah M. Tharnish, Kent A. Herink, Robert J. Douglas, Jr., Mark D. Walz, Gary M. Myers, Stanley J. Thompson, David M. Erickson, Lori Torgerson Chesser, Jo Ellen Whitney, Becky S. Knutson, Julie Johnson McLean, Beverly Evans, Margaret Van Houten, Thomas E. Stanberry, Christopher P. Janes, Sharon K. Malheiro, Kris Holub Tilley, William A. Boatwright, Thomas J. Houser, Kendall R. Watkins, Scott M. Brennan, William E. Hanigan, Debra Rectenbaugh Pettit, Matthew E. Laughlin, Judith R. Lynn Böes, William P. Kelly, Susan J. Freed, Jason M. Ross, Jason M. Stone, Amy M. Landwehr, John C. Pietila, Emily E. Harris, B. J. Miller, Jodie Clark McDougal, Jeffrey D. Ewoldt, John S. Long, Tara Z. Hall, Charles N. Wittmack, Courtney Strutt Todd, Kelly A. Deters, Amber K. Rutledge, Nichole Miras Mordini, Krystle L. Campa, Sarah K. Franklin, Victoria P. Nwasike, M. Michelle Lickteig, Christopher E. James, Robert W. Dixon, Mark D. Wickham, Christopher S. Talcott, Samuel P. Langholz, Elizabeth R. Meyer, Michele L. Warnock (licensed in Illinois)

Intellectual Property
Kent A. Herink
Emily E. Harris

Of Counsel
Donald J. Brown
Denise R. Claton
C. Carleton Frederici
A. J. Greffentius
Dennis D. Jerde
William J. Koehn
Stephen M. Morain
Joseph M. Pawlosky
Richard E. Ramsay
Thomas E. Salsbery
Neal Smith
William D. Thomas

A. Arthur Davis
1928-1997

#1843173
DAVIS BROWN KOEHN SHORS & ROBERTS P.C.

May 27, 2010

Mr. Larry James  
 Davis Brown Law Firm  
 215 – 10<sup>th</sup> Street, Ste # 1300  
 Des Moines, IA 50309

Dear Mr. James,

I apologize for the complexity of the Vehicles for Hire Section of the Municipal Code (Chapter 126). Because a Paratransit service does not require a Certificate of Convenience, but requires a License, there seems to be limited information directly under the heading of Paratransit Service (§126-155).

Within that section there are references to various other section of the Vehicle for Hire Ordinance, specifically items that are also requirements for the operation of a Taxicab, that are defined as a requirement for application for a Paratransit License. As an attachment to this cover letter I am providing the information below and attaching a document that outlines those requirements in a more clear manner.

§126-155(c)

There are no specific forms for application for a vehicle for hire (including a Paratransit License). Application is made in a narrative form, with specifically required documents or information attached.

From a review of the information provided you have, within the provided application documents ~~provided~~, I have the information as noted below;

§126-155(c) (1) - Provided

§126-155(c) (2) - Provided

§126-155(c) (3) – Partial information provided only addresses experience; still need a listing of training the applicant has had in the transportation of wheelchair-bound persons.

§126-155(c) (4) - Provided

§126-155(c) (5) - Provided

§126-155(c) (6) - Other required information as noted in the attachment;

1) Driver License applications as noted in §126-155(g)

2) Vehicle compliance, condition and inspection information as noted in §126-155(h)

3) Copies of licensing documents, with the State of Iowa and any required by the Federal Government indicating your company is licensed to operate as a Paratransit Service. If none are required, specifically state so.

§126-155(j) - Provided

§126-155(k)- Need schedule of Rates

§126-155(l) - Provide copy of drivers Trip Card for approval by the Chief of Police. Acknowledge understanding of the requirement to maintain these trip cards for at least a month as available for inspection by the City Traffic Engineer and / or the Chief of Police. Acknowledge understanding of the annual report requirement and the need to collect the required information for an annual report.

§126-187 Liability Insurance – Provide copy of Certificate of Insurance (or a statement from a licensed Insurance Agent in the State of Iowa) indicating coverage or the ability to be covered with Liability Insurance as required in §126-187(a).



ENGINEERING DEPARTMENT  
 TRAFFIC & TRANSPORTATION  
 DIVISION--  
 600 COURT AVENUE, Suite 200  
 DES MOINES, IOWA 50309  
 (515) 283-4973  
 FAX (515) 237-1640

ALL-AMERICA CITY  
 1949, 1976, 1981  
 2003

§126-187 Liability Insurance (cont.) Specifically require your insurance agent to meet the advance written notification requirements as noted in §126-187 (b). Statements indicating an "endeavor" action DO NOT meet this requirement.

§126-188 (a) Licenses; Provide a check, payable to the City of Des Moines, in the amount of \$250.00 for the Annual License and \$75.00 for each vehicle that is desired to be licensed. This check will be returned if the License is not approved by the Des Moines City Council.

§126-188(b) Acknowledge the requirement to conspicuously display the vehicle license as noted in this section.

Chapter 126, Division 3 – Drivers Licenses – Acknowledge these requirements as noted.

§126-216 Required; Specifically acknowledge the requirement for the driver of a licensed vehicle to conspicuously display their Taxicab Drivers License.

I appreciate your attention to the details required in the application process.

If you have any questions, concerns or comments, please feel free to contact me.

Thank you,



Michael R. Berry  
Traffic Facilities Administrator

Encl.

SENT E-MAIL to: [ChrisJames@davisbrownlaw.com](mailto:ChrisJames@davisbrownlaw.com)

5/27/10 13:05

## Guidelines for Application for a License to Operate a Para-Transit Service in the City of Des Moines

### Sec. 126-155. Paratransit service.

- (a) This article shall apply to the operation of a paratransit service only to the extent specified in this section.
- (b) A certificate of public convenience and necessity under this article shall not be required for the operation of a paratransit service.
- (c) Application for a license to operate a paratransit service shall be submitted to the traffic engineer, upon forms prepared or prescribed by the traffic engineer. The application shall contain:
  - (1) The name and address of the applicant and the owner of the paratransit service.
  - (2) The trade or other name, if any, under which the applicant does business and proposes to do business.
  - (3) The training and experience of the applicant in the transportation of wheelchair-bound persons.
  - (4) A description of each paratransit taxicab, including the make, model, year of manufacture, motor and chassis number; current state license number; the length of time the paratransit taxicab has been in use; and the color scheme, insignia, name, monogram or other distinguishing characteristics to be used to designate the applicant's paratransit taxicab.
  - (5) The location and description of the place from which it is intended to operate.
  - (6) Other information as the traffic engineer, shall deem reasonably necessary.
- (d) An annual license shall be issued upon compliance with subsection (c) of this section, as well as sections 126-187 and 126-188 of this article with regard to insurance and annual license fees.
- (e) No paratransit service license issued pursuant to this article may be sold, assigned or transferred without the prior approval of the city council and a finding of conformance with all of the applicable standards prescribed in this article.
- (f) The city council may suspend or revoke any or all paratransit service licenses issued under this article for failure of a licensee to maintain compliance with the standards of



this article, but only after warning and a reasonable time for compliance has been given. The traffic engineer shall give the paratransit service owner 15 days' written notice of the city council meeting at which the suspension or revocation action shall be presented.

- (g) Division 3 of this article and subsection 126-117(a) of this division concerning taxicab drivers' licenses and drivers licensed under such division and subsection shall apply to the operation of a paratransit service.
- (h) Subsections 126-117(b) and (c) through section 126-118 of this division concerning vehicle compliance, inspection and condition shall apply to the operation of a paratransit service.
- (i) Any operator of a paratransit service shall also comply with any and all applicable federal statutes and regulations and shall maintain evidence of such compliance for the review of the traffic engineer.
- (j) Section 126-119 of this division concerning identification and designation of vehicles shall apply to the operation of a paratransit service.
- (k) A current schedule of all rates charged for services provided by the paratransit service shall be filed with the traffic engineer.
- (l) Section 126-150 of this division concerning reports and records shall apply to the operation of a paratransit service.
- (m) Sections 126-152 and 126-154 of this division concerning misrepresentation and fraud in securing licenses and criminal and civil penalties shall apply to the operation of a paratransit service.

**Sec. 126-187. Liability insurance.**

- (a) A certificate shall not be issued or continued in effect unless and until the owner of the taxicab business furnishes to the traffic engineer an insurance policy or policies, or certificate of insurance, issued by an insurance company having an A.M. Best rating of no less than B+. The policy(ies) shall include commercial general liability insurance coverage and automobile liability insurance coverage, or the equivalent thereof, for the taxicab business and independent contractors of the taxicab business. The commercial general liability insurance shall include coverage for bodily injury, death and property damage with limits of liability of not less than \$750,000.00 per occurrence and aggregate combined single limit. The automobile liability insurance shall include coverage for bodily injury, death and property damage with limits of liability of not less than \$750,000.00 per occurrence combined single limit.

- (b) The certificate of insurance referred to in this section shall provide that the insurance policy or policies have been endorsed to provide 30 days advance written notice of cancellation, 45 days advance written notice of non-renewal, and ten days advance written notice of cancellation due to nonpayment of premium, and that these written notices shall be provided by registered mail to the traffic engineer.
- (c) The cancellation or other termination of any required insurance policy shall automatically revoke and terminate the certificate and all licenses issued for the taxicab business, independent contractors and the vehicles covered by such insurance policy(ies), unless another policy(ies), complying with this section, shall be provided and in effect at the time of such cancellation or termination. The traffic engineer shall immediately issue written notification of the revocation of said certificate and all licenses for the taxicab business, independent contractors and the vehicles covered by such insurance which is cancelled or terminated and shall file a copy of such notice with the city council.

(C42, §§ 23-11, 23-12; O.4898; C54, C62, §§ 56-35, 56-37, 56-43; O.7959; C62, § 56-6; C75, C79, § 19-129; O.10,060; C85, § 19-129; O.11,580; C91, § 19-129; O.13,699; C00, § 126-187; O.14,805)

**Sec. 126-188. Licenses.**

- (a) A certificate shall not be issued or continued in effect unless its holder has paid to the finance director an annual calendar year certificate fee for the right to engage in the taxicab business and an annual license fee for each vehicle operated under a certificate in the amount set forth in the schedule of fees adopted by the city council by resolution.
- (b) Whenever a license is issued by the traffic engineer under the terms of this division, a metal plate or identification sticker for each vehicle operated shall be delivered to the holder. The metal plate or identification sticker shall be approximately three inches in width and six inches in length and shall have stamped or printed thereon the word "taxicab," the official license number and the date of expiration of the license. The plate or sticker shall be affixed in a conspicuous place on the rear of the vehicle for which the license is granted. It shall be a distinctly different color each year.
- (c) The holder shall file with the traffic engineer information pertaining to each vehicle for which a license has been issued including make, model, year, and state license number.

(C42, §§ 23-17, 23-21; O.4898; C54, C62, §§ 56-18, 56-22; O.7959; C62, § 56-7; C75, C79, § 19-130; O.10,060; C91, § 19-130; O.13,699; C00, § 126-188; O.14,175, 14,805)

Acknowledge that No paratransit service license issued pursuant to this article may be sold, assigned or transferred without the prior approval of the city council and a finding of conformance with all of the applicable standards prescribed in this article.

### DIVISION 3. DRIVERS' LICENSES

#### **Sec. 126-216. Required.**

Every person who operates a taxicab for hire upon the streets of the city shall first obtain and shall properly display a taxicab driver's license in the form of a metal badge (also known as a taxicab badge).

(C42, § 23-46; C54, C62, § 56-73; O.7959; C62, § 56-10; C75, C79, C91, § 19-133; O.13,699)

#### **Sec. 126-217. Application.**

- (a) Pre-application and pre-renewal. Any person who applies for, or seeks to renew, a taxicab driver's license must first obtain, at their own expense, his or her current DCI criminal history report through the state Department of Public Safety and certified copy of his or her current driving record. If a new applicant resided outside of Iowa anytime during the five years before applying, the person must also obtain, at their own expense, a copy of his or her current criminal history report and certified copy of driving record from each state of residence during the prior five years. Any person whose taxicab driver's license has been suspended or revoked, or has expired for more than 30 days, will be required to obtain a current criminal history report and certified driving record in the same manner as a new applicant.
- (b) Any person seeking a taxicab driver's license shall file an application with the traffic engineer on forms provided by the city. The application shall contain the following information:
  - (1) The full name, current mailing address, date of birth, height, weight and driver's license number of the applicant.
  - (2) The names and addresses of three residents of the city who have known the applicant for a period of one year and who will vouch for the applicant's sobriety, honesty, and general good character.
  - (3) The experience of the applicant in driving an automobile.
  - (4) The educational background of the applicant.
  - (5) A concise history of the applicant's employment.
  - (6) A concise statement of the history of his or her health and any present impairments or disabilities.
  - (7) A list of all convictions (convicted of, pled guilty to or stipulated to the facts of a criminal offense) for criminal offenses, other than traffic offenses, during the ten years immediately preceding the date of application. If the applicant has been convicted of, pled guilty to or stipulated to the facts of any criminal offense, the applicant shall provide certified copies of any and all dispositions of the criminal offenses to the city police department at time of pre-application.
  - (8) A list of all convictions for traffic violations for which the applicant's license was suspended, revoked or barred during the five years immediately preceding the date of application.

- (9) A statement that the contents of the completed application are true.
  - (10) The date the application is filed.
  - (11) Further information as the traffic engineer may require.
- (c) Any person seeking renewal of a taxicab driver's license shall file an application with the traffic engineer on forms provided by the city. The application shall contain the following information:
- (1) The full name, current mailing address, date of birth, height, weight and driver's license number of the applicant.
  - (2) A concise history of the applicant's employment for the past one year.
  - (3) A concise statement of the history of his or her health for the past one year and any present impairments or disabilities.
  - (4) A list of all convictions (convicted of, pled guilty to or stipulated to the facts of a criminal offense) for criminal offenses, other than traffic offenses, during the past year. If the applicant has been convicted of, pled guilty to or stipulated to the facts of any criminal offense, the applicant will provide certified copies of any and all dispositions of the criminal offenses to the city police department.
  - (5) A statement that the contents of the completed application are true.
  - (6) The date the application is filed.
  - (7) Further information as the traffic engineer may require.
- (d) At the time an initial or renewal application is filed the applicant shall pay to the finance director the appropriate fee in the amount set forth in the schedule of fees adopted by the city council by resolution.

(C42, § 23-30; O.5127; C54, C62, § 56-75; O.7959; C62, § 56-11; O.8482; C75, C79, § 19-134; O.10,060; C91, § 19-134; O.13,699; C00, § 126-217; O.14,175, 14,805)

**Sec. 126-218. Qualifications of applicant.**

- (a) The following words, terms and phrases, when used in this section, shall have the meanings ascribed to them in this subsection, except where the context clearly indicates a different meaning:
- (1) *Good driving record* means all of the following:
    - (i) The applicant has not, within the preceding five years been convicted of any moving traffic violation which resulted in automatic suspension or revocation of an operators or chauffeurs license under I.C. ch. 321, 321A or 321J.
    - (ii) The applicant's operators or chauffeurs license has not been suspended or revoked for any single moving traffic violation or combination of moving traffic violations within the preceding five years.
    - (iii) The applicant has not, within the preceding one year, been convicted of three or more moving traffic violations.
    - (iv) The applicant has not, within the preceding one year, been involved in more than one traffic accident in which applicant was at fault.
  - (2) *Person of good moral character* means any person who:



- (i) Has such good reputation as will satisfy the licensing authority that he or she will comply with this article and all other laws, ordinances and regulations applicable to the performance of his or her duties as a taxicab driver.
  - (ii) Has not been convicted of, pled guilty to or stipulated to the facts of an offense involving moral turpitude or sexual abuse within the preceding ten years.
  - (iii) Has not been convicted of, pled guilty to or stipulated to the facts of an offense which is a simple misdemeanor, other than those listed in paragraph (2)(iv), below, within the preceding five years.
  - (iv) Has not been convicted of, pled guilty to or stipulated to the facts of an offense involving theft, assault, drugs, public exposure, harassment or fraud within the preceding ten years, whether the offense is a misdemeanor or a felony.
  - (v) Has not been convicted of, pled guilty to or stipulated to the facts of an offense which is a felony within the preceding ten years.
- (b) Each applicant for a taxicab driver's license must meet the requirements of this subsection before a license may be issued. The applicant shall:
- (1) Possess a current valid motor vehicle chauffeurs license, with the proper endorsement, issued by the state department of transportation.
  - (2) Be a person of good moral character.
  - (3) Have a good driving record.
  - (4) Be at least 18 years of age.

(C42, § 23-31; C54, C62, § 56-76; O.7959; C62, § 56-12; C75, C79, § 19-135; O.10,060; C91, § 19-135; O.13,699; C00, §126-217; O.13,886, 14,805)

**Sec. 126-219. Investigation of arrest and traffic record.**

The police department shall review each applicant's arrest and traffic records and report the results of the investigation to the traffic engineer.

(C62, § 56-13; O.7959; C75, C79, § 19-136; O.10,060; C91, § 19-136; O.13,699)

**Sec. 126-220. Approval of original application.**

- (a) If the traffic engineer determines the applicant meets the requirements, he or she shall issue a license.
- (b) If the traffic engineer determines the applicant does not meet the requirements, he or she shall deny the license, however, the traffic engineer may issue a license if: any conviction resulting in suspension of an operator's license under I.C. ch. 321, 321A or 321J or any other suspension of an operator's or chauffeur's license did not involve

driving behavior which is indicative of a disregard for public safety. Any license issued under this subsection shall be subject to a quarterly review to assure there have been no further convictions of traffic violations or criminal offenses entered against the applicant during such quarter.

- (c) Any applicant who is denied a license by the traffic engineer may request a hearing before the city council by filing a written appeal with the city clerk within ten days of the final action. Such appeal shall be heard by the city council within 25 days of the date the notice of appeal is filed with the city clerk. The sole issue before the city council on such appeal shall be whether the traffic engineer has abused his or her discretion in denying the license. No additional evidence may be presented in the appeal.

(C62, § 56-14; O.7959; C75, C79, § 19-137; O.10,060; C85, § 19-137; O.10,868; C91, § 19-137; O.13,699)

**Sec. 126-221. Issuance.**

Upon approval of an application for a taxicab driver's license, the traffic engineer shall issue a license to the applicant in the form of a metal taxicab badge of such form and style as the traffic engineer shall prescribe, with the license number thereon. This badge must be constantly and conspicuously displayed on the outside of the driver's hat, coat or outer garment while he or she is engaged in this employment. Any driver loaning his or her badge or permitting another person to use the same, shall be guilty of a misdemeanor and his or her license shall be revoked.

(C42, § 23-32; O.5086; C54, §§ 56-78, 56-79, 56-80; O.6017; C62, §§ 56-78, 56-79, 56-80; O.7959; C62, § 56-15; O.8482; C75, C79, § 19-138; O.10,060; C91, § 19-138; O.13,699)

**Sec. 126-222. Duration.**

A license (taxicab badge) issued under this division shall be in effect only for the calendar year in which issued or renewed.

(C42, § 23-32; O.5086; C54, §§ 56-78, 56-79, 56-80, O.6017; C62, §§ 56-78, 56-79, 56-80; O.7959; C62, § 56-15; O.8482; C75, C79, C91, § 19-139; O.13,699)

**Sec. 126-223. Fee.**

The appropriate fee for a license (taxicab badge) shall be in the amount set forth in the schedule of fees adopted by the city council by resolution.

(C42, § 23-32; O.5086; C54, §§ 56-78, 56-79, 56-80; O.6017; C62, §§ 56-78, 56-79, 56-80; O.7959; C62, § 56-15; O.8482; C75, C79, § 19-140; O.10,060; C85, § 19-140; O.11,548; C91, § 19-140; O.13,699; C00, § 126-223; O.14,175)

**Sec. 126-224. Lost license (taxicab badge).**

Any person who loses his or her taxicab badge shall present an affidavit as to the circumstances of such loss to the traffic engineer who shall issue a replacement badge upon payment of the fee for such replacement badge in the amount set forth in the schedule of fees adopted by the city council by resolution. The traffic engineer shall keep a separate record of replacement badges issued showing the date of issuance, to whom issued and the identification contained thereon.

(C42, § 23-36; O.5230; C54, C62, § 56-67; O.7959; C62, § 56-16; C75, C79, C91, § 19-141; O.13,699; C00, § 126-224; O.14,175)

**Sec. 126-225. Suspension, revocation or denial.**

- (a) If any person who has a current taxicab driver's license has his or her state driver's license suspended or revoked, or is convicted of, pleads guilty to, or stipulates to the facts of any criminal offense during the license period, he or she shall immediately notify the traffic engineer.
- (b) Any taxicab driver's license may be suspended, revoked, or denied renewal for (1) violations of this article, or (2) acts demonstrating lack or absence of good moral character, or (3) providing false information on the license application or renewal.
- (c) No license shall be suspended, revoked or denied renewal except after a hearing of the matter before the traffic engineer. The traffic engineer, upon being informed of grounds for suspension, revocation or denial of renewal, shall schedule a hearing of said matter and shall cause notice of said hearing to be delivered to the licensee or applicant by mailing notice in the regular mail at least ten days before the date of hearing to the licensee's or applicant's address as shown on the most recent application.
- (d) If, after such hearing, the traffic engineer determines (1) that a violation of this article did in fact take place, (2) that the person committed acts demonstrating lack of good moral character, or (3) that the person falsified an application for a license or a renewal, the traffic engineer may, depending on the number or severity of the acts, suspend a license for up to 30 days, revoke a license, or deny an application for a license renewal.
- (e) Any licensee or applicant may appeal such decision to the city council by notifying the city clerk in writing of the appeal within ten days of the date of the traffic engineer's decision. Such appeal shall be heard by the city council within 25 days of the date the notice of appeal is filed with the city clerk. The sole issue before the city council on such appeal shall be whether the traffic engineer abused his or her discretion in denying the license. No additional evidence may be presented in the appeal.

- (f) A licensee whose license has been revoked shall immediately surrender his or her taxicab badge to the traffic engineer and shall not be eligible to apply for another such license for a period of 180 days after such revocation. A person whose application has been denied shall not be eligible to reapply for a period of 180 days after such denial. The 180-day period shall commence on the day final city action is taken by either the traffic engineer or, if appealed, the city council.

(C42, § 23-37; C54, C62, § 56-83; O.7959; C62, § 56-17; C75, C79, § 19-142; O.10,060; C85, § 19-142; O.10,868; C91, § 19-142; O.13,699)

**Sec. 126-117. Compliance required.**

- (a) Every driver licensed under this article shall comply with all city, state and federal laws. Failure to do so will justify suspension or revocation of his or her license.
- (b) Any vehicle operated under the provisions of this article shall comply with all applicable requirements of the state motor vehicle code or other state and city laws.
- (c) Any vehicle operated under the provisions of this article shall be inspected quarterly by the holder of the certificate to ensure compliance to all applicable requirements of the state motor vehicle code or state and city laws.

(C62, §§ 56-18, 56-19; O.7959; C75, § 19-143; O.8960; C79, § 19-143; O.10,060; C91, § 19-143; O.13,699)

**Sec. 126-118. Vehicle condition.**

- (a) Prior to its use and operation, each vehicle shall be made to comply with all applicable requirements of the state motor vehicle code and other state and city laws.
- (b) Each vehicle operating under this article shall be kept in a clean and sanitary condition, both interior and exterior.
- (c) Each vehicle shall be equipped with an operable heater and air conditioner of adequate capacity.
- (d) Each vehicle exterior shall be maintained in good condition, with all parts intact and properly painted.
- (e) Each vehicle shall be in excellent mechanical condition, free from all known defects which could cause inconvenience or hazard to any passenger.
- (f) Each vehicle shall have properly inflated tires with a safe amount of remaining tread.
- (g) Each vehicle shall be not greater than ten (10) years old, based on the model year of production, and shall include all standard safety features in proper working order. The ten (10) year maximum age limit will not disqualify a vehicle from use as a taxicab until January 1, 2011, provided the vehicle complies with all other requirements.



(C62, § 56-19; O.7959; C75, C79, C91, § 19-144; O.13,699; C00, § 126-118; O.14,805)

Indicate what evidence will be maintained to provide proof to the Traffic Engineer of compliance with all applicable Federal statutes and regulations that may be specifically held for review by the City Traffic Engineer

**Sec. 126-119. Designation.**

- (a) Each taxicab shall bear on the outside of a door on each side the name of the holder; and, in addition, may bear an identifying design. The markings shall be painted or affixed by decal in letters or figures at least two inches in height. Any licensed vehicle shall not have a color scheme, identifying design, monogram, or insignia that will conflict with or imitate any existing taxicab or any official or emergency vehicle color scheme, in a manner that will mislead or deceive or defraud the public.
- (b) Each taxicab shall bear on the inside of the passenger compartment clearly visible to passengers a sign which denotes the name of the holder and the number used by the holder to designate the vehicle.

(C42, §§ 23-10, 23-18; O.5127; C54, C62, §§ 56-4, 56-7; O.7959; C62, § 56-20; C75, C79, § 19-145; O.10,060; C91, § 19-145; O.13,699; C00, § 126-119; O.14,805)

Provide Schedule of Rates

**Sec. 126-150. Reports and records.**

- (a) Each driver shall maintain a daily trip card. All complete trip cards shall be returned to the holder by the driver at the conclusion of his or her tour of duty. The forms for each trip card shall be furnished to the driver by the holder and shall be approved by the chief of police.
- (b) Each holder shall submit to the traffic engineer a report by January 30 of each year summarizing the activity of the previous year. The report shall contain general information on number and types of complaints received including information on any discrimination complaints; number of trips per vehicle; age, mileage and general condition of each vehicle; tenure and turnover of drivers; periodic normal response time and other information as required by the traffic engineer.

- (c) Each holder of a certificate shall retain and preserve all trip cards in a safe place for at least one month following the date of making the record. Trip cards shall be available to the chief of police and the traffic engineer.

(C62, § 56-32; O.7959; C75, C79, § 19-175; O.10,060; C91, § 19-175; O.13,699)

**Sec. 126-152. Misrepresentation or fraud in securing certificate or license.**

No person shall give any false or fictitious information on any application for any certificate or license provided for in this article or practice any fraud or misrepresentation in any manner to secure a certificate or license.

**Sec. 126-154. Criminal or civil penalties.**

- (a) Any person, firm, or corporation who fails to perform an act required by the provisions of this article, or who commits an act prohibited by the provisions of this article, shall be guilty of a misdemeanor punishable by fine or imprisonment as provided by section 1-15 of this Code, or shall be guilty of a municipal infraction punishable by a civil penalty as provided by section 1-15 of this Code.
- (b) Upon issuance of any citation or charge under this article, the issuing agency shall deliver a copy of the citation to the city prosecutor and the traffic engineer.

(C85, § 19-179; O.11,580; C91, § 19-179; O.13,699)