★ Roll Ca			<b></b>					Agenda Item Numbe
Date March	h 26, 20	)12						
		L			HEARING ON			
	ise to o	drive a	taxical	o in the	City of Des			15, filed an application tment of Traffic and
WI his applica			Ahmed	requeste	d an opportunit	y to addres	s the City Co	ouncil on the matter of
		-			provided with drive a taxicab		unity to addre	ess the City Council on
	unicipal	Code				•	-	difies him under Des icab license issuance;
BE IT RES	OLVEI	) (Choo	se one	of the tw	o alternatives):			
of Des Mo					Ahmed's applic	cation for li	cense to driv	ve a taxicab in the City
				M	OVED BY		TO DENY	LICENSE.
of Des Mo					Ahmed's applic	cation for li	icense to driv	ve a taxicab in the City
FORM AP  Cotherine  Katharine  Assistant C	Cassier Massier	by	Ma		OVED BY		TO GRANT	ΓLICENSE.
COUNCIL ACTION	YEAS	NAYS	PASS	ABSENT			CERTIFICAT	Ē
COWNIE					I DIANE	DAIII C	ity Clark	of oald City bearing

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

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



March 12, 2012

Hamad G. Koko Ahmed 3800 Martin Luther King Jr. Parkway, #15 Des Monies, IA 50310

Re: Taxicab License Appeal

Dear Mr. Ahmed:

The purpose of this letter is to acknowledge receipt of timely appeal of the decision to deny issuance of a taxicab license, as presented to you in an March 6, 2012 letter from the City Traffic Engineer.

Accordingly, I have set this matter for hearing on March 26, 2012 at 5:00 p.m. in the City Council Chambers, City Hall, 400 Robert D. Ray Drive. A copy of the portion of the City Code pertaining to the appeal process is enclosed for your information. Failure to appear at the scheduled hearing will be deemed as a waiver of your rights to a hearing.

Please call if you have questions or concerns in this regard.

Sincerely,

Diane Rauh

City Clerk

DR:kh Enc.

cc: Jeb Brewer - Engineering

ume Fout.

K. Massier - Legal

M. West - Police

J. Bohac-T & T

Diane Rauh

City Clerk

City Hall

400 Robert D. Ray Drive

Des Moines, IA 50309

COLLAR IS DATE:

I request a hearing before the City Council to appeal the decision of the City Traffic Engineer to deny my Taxicab License application, as outlined in Section 126-218 of the Municipal Code. I understand I must provide a letter from the Taxicab Company stating that they will allow me to drive for them and will provide dispatch service to me.

Name

Address

Phone 51

Date

15-423-250

Signature



March 6, 2012

Hamad G. Koko Ahmed 3800 Martin Luther King Jr. Parkway, #15 Des Moines, IA 50310

RE: Taxi Driver's License

Dear Mr. Ahmed:

Please be advised that based upon a recommendation of the Des Moines Police Department, I have denied your application for a Taxi Driver's License. This denial is based on your criminal record, which does not meet the requirements for obtaining a Taxi Driver's License.

According to the Police Department records, the following activity occurred:

Criminal Record:

01/06/2008 Arrested for Assault and convicted of Disorderly Conduct, Misdemeanor Conviction

This record does not meet the requirements for good moral character as required by the City of Des Moines Municipal Code. Therefore, your application for a Taxi Driver's License is denied under Municipal Code Section 126-218 (a-2, iii). A copy of the code section is enclosed for your information.

If you desire to appeal this matter, you may request a hearing before the Des Moines City Council by filing a written appeal with the City Clerk within ten (10) days of receiving this letter. If you do appeal this matter, your background information will be provided to the City Council and you must appear at the designated hearing for your appeal to be considered. You must also provide a letter from the Taxi Company that they will allow you to drive for them.

Sincerely

Jennifet L. Bohac City Traffic Engineer

JLB/jag Enclosure

cc: Jeb Brewer, City Engineer Katharine Massier, Legal Dept. Michael West, Police Dept. Diane Rauh, City Clerk

## City of Des Moines, Iowa Office of

## **Des Moines Police Department** Community Outreach and Protective Services Section **Traffic Unit**

To:

Jennifer Bohac

Date: 29February2012

From: Michael West

Subject: Taxicab License

Senior Police Officer

Traffic and Transportation

Hamad Ahmed

Traffic Unit

Currently the applicant has an Iowa Class "D" drivers license, which does meet the requirements to operate a taxicab. A review of Mr. Ahmed's Iowa/Local criminal record reflects that with-in 5 years preceding this application the following activity occurred.

01/06/2008

Arrested for Assault and convicted of Disorderly Conduct - Misdemeanor

Conviction

This application is being denied under City of Des Moines Ordinance 126-218 (a-2,iii).

Michael West 4810



CITY OF DESTROINE	\				
APPLICATION FOR LICENSE TO DRIVE A TAXICAE	BILIMOUSINE				
Name KOKO Whyned Hands	CYUN (Midd	ra			
Address 3800 mkpu/t+15	(				
Des-Moines -+ A - 50310	575_1	123-750			
(City, State & Zip Code)	Ten-	rie Number)			
OSW.	ass: LExp.	Date: 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
Totalia Co	Color of Eyes:	BVI			
Have you ever been licensed as a City of Des Moines Taxi/Limo Driver?	When?				
Years of experience driving an automobile.					
Have you ever had your driver's license suspended/revoked? If so,	when?				
Give reason(s) for suspension/revocation.					
	14				
List all convictions for traffic violations for which your license was suspended/revoke	d during the last f	ive (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	EDUCATION				
2506 2507 wal-mas & Jou - T3th, windsor hight	School	Circle Highest Grade Completed			
1987 1990 Khaptoum-Sudan	Elementary	1234			
1987 1996 Rhaosoum - Saday)		5 6 7(8)			
1992 1998 Khackum - 8Udan	High School	9 10 11 (12)			
2006 009 DES-MOINES AREN COMMUNITYCO					
2 9 1/5/1 2 2 2 10/1/ 0 A 200 0 (200/00) 2 10/00 5 10/00	Callana	120156			
1301 CIC DES MOINES ALPERCONNIMINATO CONTE	College	1 2(3)4 5 6			
207 2000 World to Dailish and I was stone	 	1220			
BOULD TO BOTH BUTTON COUNTY VACOUTIONS	Trade School Other	1 2 3 (4)			
HEALTH RECORD:	La service to the second				
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:					
List any current medications or medical conditions for the past live (5) years which hi		nd			

## 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.	Name Golf	sal Kuhu	Phor	ne No. 54 J-	270-3840	
_	Address	4031-39th PL-	Des-maine	31-IA	-20319	
2.	Name \QV	nes both	Phor	ne No.5715-	283-9143	
_	Address 45	5-54G-SW-D	t-Des-	Morno	4- IA-50	30°
3.	Name Ras	heed Ajak	Phor	ne No. 545-	-283-1950	
_	Address \	55-5th-SW	-St-Desn	romes	-IB-80	$\overline{\omega}$
	•					- ,
		a license to drive a Taxicab/Lim s governing Taxicab/Limousines				, •
				•		
		am the individual making the for oing questions and other statem				
belie	ef.		16 0 -	110-	1	
			07-16-2012	+100-	plicant's Signature)	
			(Date)		,	
have	examined the a	signated by the Chief of Police o pplicant's arrest and traffic reco or a license to drive a Taxicab/Li	rds. After careful examin			ı
П	APPROVED	REJECTED	2/20/12	116	) D-4810	
_	APPROVED	REJECTED	2/29/12 (Date)		Representative, Chief of Polic	e)
Poss	ipt Number:	The state of the s		angerta e e e yeter S	e in least the in the second	griffer a li
3 3 4. 			.*			
Date_				•	<b>-</b>	
Amoi	unt:				REJECTED	
Badg	e Number:		Application	on for License	APPROVED	
Com	pany:					
Owne	)r:					
	to the state of th		(Date)	(City Traffic Eng	gineer)	

(Toll Free) 800-532-1121 515-244-9124 FAX: 515-239-1837

#### **Certified Abstract of Driving Record**

**Inquiry Date:** 

2/25/2012

DL/ID #:

(IA)

2297611

Name:

Ahmed, Hamad G

Class:

Issue Date:

D

Customer #:

**ID Status:** 

None

Address:

3800 MLK JR PKWY APT Audit #:

5545343 **DL Status:**  VAL

City/State:

DES MOINES, IA

**Expiration** 

10/01/2011 01/01/2013 CDL Status: **CDL** Cert

None None

Date:

Status:

503105871

**Endorsements: 3** 

**CDL** Med Status:

None

None

**Mailing Address:** 

3800 MLK JR PKWY APT Restrictions: Date of Birth:

NONE 1/1/1974 Restriction

Supplement:

Mailing City/State: DES MOINES, IA

503105871

Sex:

М

**History Information** 

CLEAR DRIVING RECORD

Name: Ahmed, Hamad G DL/ID: 216AA3211

Pursuant to Iowa Code §321.10, I, Kim Snook, Director of Office of Driver Services, Iowa Department of Transportation, do hereby certify that I am the custodian of the records held by the Office of Driver Services, that this is a true and accurate copy of an official record currently in the custody of said office, and that I have been authorized by the Director of the Iowa Department of Transportation to so certify.

In witness whereof, I have caused my signature and the seal of the Department to be set upon this document, at Ankeny, Iowa this date:

Office of Driver Services Iowa Department of Transportation

Name: Ahmed, Hamad G DL/ID:



# State of Iowa Division of Criminal Investigation 215 E 7<sup>th</sup> St Des Moines IA 50319 Ph. 515-725-6066 Fax 515-725-6080



## Iowa Criminal History Record Check Walk-In Request

Your name HAMAD G.  Address 2500 M/K  City/State/Zip DES - MOTA  Phone# 545-423-25	Fill in all shaded areas.			
Requesting an Iowa criminal history re	cord check on:  First Name Primer Nombre (mandatory)	Middle Name Segundo Nombre (recommended)		
Last Name Apellido (mandatory)	Harnael	Guama		
Date of Birth Fecha Nacimiento (mandatory)	_			
Waiver Signature Firma (If the request is on yourself, please sign. If the request is on someone else, write N/A.)				
Results  As of 2-17-12, a name and date of birth check revealed:  No record found  Record attached, DCI # 738669  DCI initials Bold				
Receipt Number of requests x \$15.00 per last name = Total amount \$ t 5.00  Method of payment:				
Credit Card Number #Exp. Date				

## IOWA CRIMINAL HISTORY MISDEMEANOR CONVICTIONS ONLY

DCI 00738669
PAGE 1 OF 2
DATE PRINTED2012/02/17

DCI:00738669

NAME: AHMED, HAMAD GUMMA

AHMED-KOKO, HAMAD GUMMA

DOB SEX RAC HGT WGT EYE HAIR SKN POB 19740101 M B 508 160 BRO BAL BLK YY

ADDITIONAL IDENTIFIERS PHOTO AVAILABLE: Y

CCH RECORD \*\*\*

01 ARRESTED 20041130

AGENCY: IA0770000 POLK CO SO

CHARGE NO- 01 IA STATUTE IA321-279

ELUDING

TRK#: 701885901

COURT DISPOSITION

AGENCY: IA077015J POLK CO DIST COURT

COUNT NO- 01 IA STATUTE IA321.279(1)

ELUDING

COURT CASE ID: 05771 SRCR188842 CHARGE CLASS: MISDEMEANOR CONVICTION

TRK#: 701885901

SENTENCE DISP EFF DAT

REFERRED TO OTHER 20050131

AGENCY

 SUSPENDED JAIL
 365D
 20050131

 JAIL
 365D
 20050131

 FINE
 \$250
 20050131

 PROBATION
 1Y
 20050131

 PROBATION EXTENDED
 2Y
 20051229

02 ARRESTED 20080106

AGENCY: IA0770300 DES MOINES PD

ASSAULT USE/DISPLAY OF A WEAPON-1989

TRK#: 7B0051X01

COURT DISPOSITION

AGENCY: IA077015J POLK CO DIST COURT

COUNT NO- 01 IA STATUTE IA723.4(3)

DISORDERLY CONDUCT - ABUSIVE EPITHETS/THREAT GESTURE

COURT CASE ID: 05771 AGCR217298 CHARGE CLASS: MISDEMEANOR CONVICTION

TRK#: 7B0051X01

SENTENCE DISP EFF DAT

TIME SERVED 2D 20080321

JAIL 2D 20080321

AN ARREST WITHOUT DISPOSITION IS NOT AN INDICATION OF GUILT. THIS RECORD MAINTAINED BY THE IOWA DIVISION OF CRIMINAL INVESTIGATION, BUREAU OF IDENTIFICATION IS A PUBLIC RECORD BUT CAN ONLY BE RELEASED TO NON-LAW ENFORCEMENT AGENCIES BY THE DCI.

IN THE ABSENCE OF FINGERPRINTS FOR POSITIVE IDENTIFICATION THIS RECORD IS BASED ON INFORMATION FURNISHED. WE CANNOT CONFIRM OR DENY THAT THE RECORD COVERS THE SUBJECT OF YOUR INQUIRY.

DIVISION OF CRIMINAL INVESTIGATION