

Date April 23, 2012

**PUBLIC HEARING ON TAXICAB
LICENSE APPLICATION OF HAMAD G. AHMED**

WHEREAS, Hamad G. Ahmed, 3800 Martin Luther King Jr. Parkway, #15, filed an application for a license to drive a taxicab in the City of Des Moines and the Department of Traffic and Transportation rejected said application; and

WHEREAS, Mr. Ahmed requested an opportunity to address the City Council on the matter of his application; and

WHEREAS, Mr. Ahmed has been provided with the opportunity to address the City Council on the matter of his application for a license to drive a taxicab; and

WHEREAS, Mr. Ahmed's conviction for Disorderly Conduct disqualifies him under Des Moines Municipal Code §126- 218 (a)(2)(iii) regarding qualifications for taxicab license issuance; NOW, THEREFORE,

BE IT RESOLVED (Choose one of the two alternatives):

_____ Alternative One: That Mr. Ahmed's application for license to drive a taxicab in the City of Des Moines be and is hereby denied.

MOVED BY _____ TO DENY LICENSE.

_____ Alternative Two: That Mr. Ahmed's application for license to drive a taxicab in the City of Des Moines be and is hereby granted.

MOVED BY _____ TO GRANT LICENSE.

FORM APPROVED:

Katharine Massier
Katharine Massier
Assistant 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

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March 12, 2012

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

A handwritten signature in cursive script that reads "Diane Rauh".

Diane Rauh
City Clerk

DR:kh
Enc.

cc: Jeb Brewer – Engineering
K. Massier – Legal
M. West – Police
J. Bohac – T & T


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Diane Rauh
City Clerk
City Hall
400 Robert D. Ray Drive
Des Moines, IA 50309

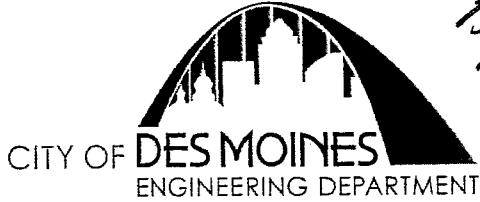
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2012 MAR 12 PM 12:41
CITY CLERK
DES MOINES, IA

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 Hamad G. Ghoneid
Address 3800 MILKWAY #15
Phone 515-423-2507
Date 03/10/2012


Signature

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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:

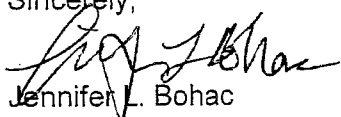
Please be advised that based upon a recommendation of the Des Moines Police Department, I have denied your application for a Taxi Driver's License. This denial is based on your criminal record, which does not meet the requirements for obtaining a Taxi Driver's License.

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,

Jennifer 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

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2012 MAR 12 PM 12:41
CITY CLERK
DES MOINES, IA

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**City of Des Moines, Iowa
Office of
Des Moines Police Department
Community Outreach and Protective Services Section
Traffic Unit**

To: Jennifer Bohac
Traffic and Transportation

Date: 29February2012

From: Michael West
Senior Police Officer
Traffic Unit

Subject: Taxicab License
Hamad Ahmed

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



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CITY OF DES MOINES

APPLICATION FOR LICENSE TO DRIVE A TAXICAB/LIMOUSINE

Name: ~~AKO~~ Koko Ahmed Hamad Guma
(Last) (First) (Middle)

Address: 3800 MIKPUY#15
Des Moines IA 50310
(City, State & Zip Code) Phone Number: 515-423-7507

Birth Date: 1974 DL # [REDACTED] SS# [REDACTED] Class: D Exp. Date: 1/1/13

Weight: 170 Height: 5-08 Color of Hair: BK Color of Eyes: BK

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

Years of experience driving an automobile: 8 years 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:			EDUCATION RECORD:	
From	To	Employer's Name and Address	School	Circle Highest Grade Completed
2006	2007	wal-mart-1001-13th windsor hwy		
1987	1990	Khartoum - Sudan	Elementary	1 2 3 4 5 6 7 8
1992	1998	Khartoum - Sudan	High School	9 10 11 12
2006	2009	DES-MOINES AREA COMMUNITY CO	College	1 2 3 4 5 6
2009	2012	DES-MOINES AREA COMMUNITY COLLEGE		
2002	2004	EGYPT, British council vacation	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

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

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

- 1. Name Fayçal KUKU Phone No. 515-270-3890
Address 4031-39th PL - Des - Moines - IA - 50310
- 2. Name James Both Phone No. 515-283-9143
Address 455-5th - SW - St - Des - Moines - IA - 50309
- 3. Name Rasheed AJAK Phone No. 515-283-7959
Address 455-5th - SW - St - Des Moines IA - 50309

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.

02-16-2012
(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

2/29/12
(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)



Iowa Department of Transportation

Office of Driver Services
PO Box 9204, Des Moines, IA 50306-9204

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

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Certified Abstract of Driving Record

Inquiry Date:	2/25/2012	DL/ID #:	[REDACTED] (IA)	Customer #:	2297611
Name:	Ahmed, Hamad G	Class:	D	ID Status:	None
Address:	3800 MLK JR PKWY APT 15	Audit #:	5545343	DL Status:	VAL
City/State:	DES MOINES, IA 503105871	Issue Date:	10/01/2011	CDL Status:	None
		Expiration Date:	01/01/2013	CDL Cert Status:	None
		Endorsements:	3	CDL Med Status:	None
Mailing Address:	3800 MLK JR PKWY APT 15	Restrictions:	NONE	Restriction Supplement:	None
Mailing City/State:	DES MOINES, IA 503105871	Date of Birth:	1/1/1974		
		Sex:	M		

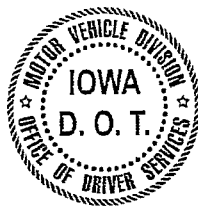
History Information

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:



2/25/2012

Office of Driver Services
Iowa Department of Transportation

Name: Ahmed, Hamad G **DL/ID:** [REDACTED]



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



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Iowa Criminal History Record Check
 Walk-In Request

Your name	HAMAD G. AHMED
Address	3500 MIKPAV #15
City/State/Zip	DES - MOINES - IA - 50310
Phone#	515-423-2507

Fill in all shaded areas.

Requesting an Iowa criminal history record check on:

Last Name <i>Apellido</i> (mandatory)	First Name <i>Primer Nombre</i> (mandatory)	Middle Name <i>Segundo Nombre</i> (recommended)
Ahmed	Hamad	Guama
Date of Birth <i>Fecha Nacimiento</i> (mandatory)	Gender <i>Genero</i> (mandatory)	Social Security Number (recommended)
01-01-1974	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	[REDACTED]

Waiver Signature *Firma* (If the request is on yourself, please sign. If the request is on someone else, write N/A.)

[Handwritten Signature]

Results

As of 2-17-12, a name and date of birth check revealed:

No record found

Record attached, DCI # 738669

DCI initials Bali

DCI USE ONLY

Receipt

Number of requests 1 x \$15.00 per last name = Total amount \$ 15.00

Method of payment: cash money order check # _____ MasterCard or Visa

Cardholder's name Hamad Koko Ahmed Last 4 digits of MC or Visa 4267

DCI initials QR

Credit Card Number # _____ Exp. Date _____

IOWA CRIMINAL HISTORY
MISDEMEANOR CONVICTIONS ONLY

DCI 00738669
PAGE 1 OF 2
DATE PRINTED-
2012/02/17

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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
CHARGE NO- 01 IA STATUTE IA708.2(3)-2
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.

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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