



CODE ENFORCEMENT OFFICE

WEST VALLEY PATROL DIVISION

1601 S. DE ANZA BLVD. • CUPERTINO, CA 95014

TELEPHONE: (408) 777-3182 • FAX: (408) 868-6641

code@cupertino.org

Taxicab Permit Fee Schedule / Criteria for Issuance

The following information is provided to all individuals interested in obtaining a taxicab owner or taxicab driver permit from the City of Cupertino. The taxicab permit will allow the owner or driver to operate in a licensed taxicab vehicle or taxicab company in Cupertino.

Criteria:

1. Taxicab owners must meet the following requirements:

- All taxicab owners must have motor vehicle liability and property damage insurance in this state; \$100,000/\$300,000 personal injury/death and \$50,000 property damage.
- All self-employed independent drivers shall have the mandatory alcohol and controlled substance certification sent directly to the City of Cupertino from the testing agency.
- All taxicab owners must sign a vehicle and phone operations agreement. Please read the vehicle and phone operations agreement attached to the owner application.
- All taxicab owners must present a schedule of taxi fare rates. These rates must be approved by City Council.
- All taxicab owners must present a sworn financial statement.
- Each application for taxicab owner must be for a minimum of not less than three taxicabs.

2. Taxicab drivers must meet the following requirements:

- All taxicab drivers must present certificate of a recently performed negative test for alcohol and controlled substances from the employer.
- All self-employed independent drivers must have the alcohol and controlled substance test sent directly to the City of Cupertino from the testing agency.
- Must have a current driver's license issued by the State of California.
- Must pass a background investigation.
- Must pass a fingerprint clearance check.
- All taxicab drivers must be at least 18 years old.

Fees:

The current fee structure for a taxicab owner or driver permit is as follows:

- Taxicab owner fee: – Permit valid for 2 years \$323.00
- Driver permit fee: – Permit valid for 2 years \$323.00
- Permit renewals: \$62.00
- *Business license fee (per vehicle): \$133.00

*The business license fee may not be required if the driver is employed by a licensed Cupertino taxicab establishment.



Permit Number _____

Original

Renewal

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**City of Cupertino
Taxicab Owner Permit Application**

Establishment Name _____

Address _____ Telephone Number _____

Name of Building Owner _____

Present Use of Building _____

Applicant Information

Please Note- If the applicant is a partnership, please provide the names and street addresses of each general and limited partner. If one or more of the partners is a corporation, the name of the corporation shall be set forth exactly as shown in its articles of incorporation or charter together with the state and date of incorporation and the full legal names and street addresses of each of its current officers and directors. (Attach additional sheets if necessary)

Applicant Name _____
Last, First Middle

Alias, Maiden or Former Names _____

Current Home Address _____

City _____ State _____ Zip Code _____

Home Telephone _____ Business Telephone _____

Date of Birth _____ Place of Birth _____

Drivers License/State Identification Number _____ State _____

Social Security Number _____

Sex _____ Height _____ Weight _____ Eyes _____ Hair _____

United States Citizen? _____ Registered Alien? _____ Green Card Number _____

Name, address and phone number of person to be in charge of premises

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Description of vehicles to be operated

**Minimum of three taxicabs required
(Attach additional sheets)**

Please give a complete description of vehicles to be operated.

Make _____ Model _____ Year _____ VIN# _____

License Number _____ Color Scheme _____

Characteristic Insignia _____

Number of vehicles to be operated _____ (Minimum of three taxicabs required)

Please state past experience in operating a taxicab company

Establishment Name _____

Address _____ Telephone Number _____

City _____ State _____ Zip Code _____ Dates _____

Co-Applicant(s) Name _____

Citizenship _____ *Social Security Number* _____

Please state co-applicants experience operating a taxicab company _____



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**City of Cupertino
Taxicab Driver or Taxicab Owner Background Investigation Questionnaire**

Applicant Name _____
Last, First Middle

The following information is necessary to complete your background examination. Please answer all questions accurately. Should you need to provide explanation for any question/s, please attach a type written statement to this questionnaire. Be advised that any incomplete information may delay the processing of your application.

1. Have you either as an employee or owner/agent of a business, had a Driver's license, chauffeur's license, certificate, permit, or other authorization to engage in the practice of taxicab owner, driver or related business, suspended or revoked within the past ten years? _____. If yes, please attach details providing the following information:
 - The date/s of the suspension or revocation.
 - The reason for the suspension or revocation.
 - The name and location of the jurisdiction or agency suspending or revoking such certificate, permit, or authorization.
2. Have you previously applied to the City of Cupertino for a taxicab owner or taxicab driver permit? _____. If yes, please attach the date of application and every name under which the application was made.
3. Have you ever been convicted of an offense which is in violation of the provisions of the California Penal Code Sections 266(I), 311 through 311.7, 314, 315, 316, 318, 647(b) or (d), or equivalent offenses under the laws of another jurisdiction, even if expunged pursuant to Penal Code Section 1203.4? _____. If yes, please attach additional details.

4. Have you ever been convicted of an offense which requires registration pursuant to California Penal Code Section 290? _____. If yes, please attach additional details.

5. Have you ever been convicted of an offense, which involves violation of California Health and Safety Sections 11351, 11352, 11358 through 11363, 11378 through 11380, 11054, 11056, 11057, 11058, any other violation(s) involving illegal possession for sale, or sales of a controlled substance, or equivalent offenses under the laws of another jurisdiction, even if expunged pursuant to Penal Code Section 1203.4? _____. If yes, please attach additional details.

6. Have you ever been convicted of any offense involving the use of force or violence upon another person, any offense involving sexual misconduct with children, or any offense involving theft? _____. If yes, please attach additional details.

7. Have you been convicted of any offenses including traffic violations within the past ten years? _____. If yes, please attach additional details.

Under penalty of perjury, I attest that all of the statements and information contained herein are true and correct. I understand that making false, misleading, or fraudulent statements or omissions within this application will result in the application being denied. If any of the information provided herein is found to be false, misleading, or fraudulent after a permit has been issued, it shall be grounds for immediate revocations of said permit by the City of Cupertino.

Print Name

Date

Signature

Date



CODE ENFORCEMENT OFFICE

CITY HALL
10300 TORRE AVENUE • CUPERTINO, CA 95014-3255
TELEPHONE: (408) 777-3182 • FAX: (408) 777-3174
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Vehicle and Phone Operations Agreement

Applicant(s) agree to keep in operation not less than one-third of the number of taxicabs for which a license has been granted each day, from midnight to six a.m.; not less than one-half of the number of taxicabs for which a license has been granted each day, from 6 a.m. to 8 p.m.; and not less than one-third of the number of taxicabs for which a license has been granted each day, from 8 p.m. to midnight.

Applicants(s) also agree to maintain on the premises of the principle place of business, in operating order at all times, at least one telephone for every eight taxicabs and at all times there will be an operator in charge of the phone(s) who will be dedicated exclusively to answering phone(s) and dispatching taxicabs in response to transportation requests.

Applicant's Signature

Date

Applicant's Signature

Date



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Fingerprinting Services

All fingerprinting services are conducted using the LIVESCAN system and are coordinated through the Santa Clara County Sheriff's Department. The following are Sheriff's Department locations that are available to serve you:

Headquarters Main Office
55 West Younger Avenue
San Jose, CA 95110
(408) 808-4760

Hours: 8:30 am to 4:30 pm
Monday - Friday

West Valley Substation
1601 S. De Anza Blvd
Cupertino, CA 95014
(408) 868-6614

Hours: 8:30 am to 4:00 pm
Monday - Friday

South County Substation
12431 Monterey Road
San Martin, CA 95046
(408) 686-3651

Hours: 8:30 am to 5:00 pm
Monday - Friday