	RENEW/ FOR TAXIO Juant to Santa Barl ving documents, co <u>SHEET:</u> A release ed LED envelope, or fa	AL APF CAB DRI bara Mur ompleted DDITION Drug tes Alcohol t 2 Passpo	AL ITEMS: t (NIDA, or 10-panel)* est (BAT)* ort-sized Photos ailed by testing agency.	City Stamp/Paid And register receipt \$100 Renewal Fee OR \$200 LATE Renewal Date Stamp - Received
St, Santa Barbara, CA 93101. drop off any applications in pers Renewal Fee: \$100				
Please complete the following Applicant's Full Name: Name As Listed On CA Driver's Current Permit Number : Residence Address (include street)				
Mailing Address, if different (include street, city, and zip code): Email				Temp Issd. Thru:
Phone Number: Date of Birth:			Permit #	
Current Taxicab Employer or Business Name:			Cab #	CLU Permit Log
CA Driver's License #:	Exp:	Social	Security #:	Date sent to Billing/ Finance:
Applicant's signature indicates that he/she understands that if <u>any</u> information herein is misrepresented, incomplete, or omitted it may be grounds for denial.				
Applicant's signat	ure		Date	
Police Technician's recommenda	tions:			
CHIEF OF POLICE or DESIGNEI			Initials/ Body #:	Date:
Upon review, this application		D	APPROVED-1 YR	APPROVED-2 YRS
Signature:		_ Title:_		Date:

CITY OF SANTA BARBARA

REFUND POLICY & GROUNDS FOR DENIAL TAXICAB DRIVER PERMIT RENEWAL

NOTICE TO APPLICANT: The application fee for this renewal is NON-REFUNDABLE.

Once paid, the application fee is not refundable. The following circumstances are no exception:

- If you are denied a renewed taxicab driver permit;
- If you withdraw your application; or
- If you fail to complete the permit process.

Please read the *Grounds for Denial* and sign this acknowledgement <u>before</u> you complete the application. Complete language of Grounds for Denial can be found in Santa Barbara Municipal Code, §5.29.190.

GROUNDS FOR DENIAL (condensed):

- 1. Less than 6 months of driving experience in the United States.
- 2. No valid California driver's license.
- 3. Under 21 years of age (except with proof of a valid Class B California driver's license).
- 4. Required registration as a sex offender pursuant to Section 290 of the California Penal Code, or required registration in another state or country as a sex offender comparable to §290 PC.
- 5. A conviction of, or release from confinement for a conviction of, a crime involving moral turpitude, narcotics or dangerous drugs within the past 3 years.
- 6. A conviction of reckless driving within 2 years preceding application for permit or renewal.
- 7. A conviction of operating a vehicle while under the influence of alcohol or drugs 2 or more times within 7 years immediately preceding an application for a permit or renewal.
- 8. 3 or more public intoxication convictions in the 2 years immediately preceding an application for a permit or renewal.
- For a new permit: 2 or more moving violation convictions within 1 year preceding an application; or For a renewal: 3 moving violation convictions within 1 year, OR 4 moving violation convictions in 2 years. "Moving violation" is defined by State Vehicle Code §12810.
- 10. 1 or more citations or warrants outstanding which, in the opinion of Police Department staff, may result in a conviction of an offense that would normally result in denial or permit revocation.
- 11. Any conviction of a felony or misdemeanor hit and run.
- 12. A positive result on a state or federally-recognized controlled substances and/or alcohol tests.
- 13. Failure to complete the application process.
- 14. False statements, or incomplete or inaccurate information on the application.

Signature below confirms that the applicant has read the above information, understands the Grounds for Denial of a permit, and understands that the application fee is NON-REFUNDABLE.

Applicant Signature:

Date: _____

AUTHORIZATION TO RELEASE INFORMATION TO THE CITY OF SANTA BARBARA, POLICE DEPARTMENT

As an applicant for a City permit within the City of Santa Barbara, I hereby authorize the release of any and all information that you may have concerning my work records, education records, medical records, and information of a confidential or privileged nature to the City of Santa Barbara Police Department and its agents.

I hereby release you, your organization, or others, from any liability or damage, which may result from furnishing the information requested.

Printed (Permit Applicant's Name)

Signature (Permit Applicant)

Date

CITY OF SANTA BARBARA

ARREST HISTORY – RENEWAL APPLICATION

(Pursuant to Santa Barbara Municipal Code, Chapter 5.29)

List ALL arrests and citations for the past 7 years. Include all infractions,

misdemeanors, and felonies. Failure to do so may result in DENIAL of this application.

- Attach a separate sheet if necessary. If you don't recall your arrest history, visit all law enforcement agencies that may have arrested or cited you and request your arrest history.
- If you were <u>cited for any violations while in a taxicab</u>, they must be listed below.
- If you have not been arrested or cited in the past 7 years, write "NONE".
- The space below cannot be left blank.

dication

Are you currently:

On probation?	🗌 No 🗌 Yes	Charges:		
On parole?	🗌 No 🗌 Yes	Charges:		
Required to register pursuant to Penal Code section 290 (sex registrant)?			🗌 No	Yes

Signature below indicates the applicant understands that if any information requested on this form is misrepresented, it may be grounds for denial of this permit application.

Signature (Permit Applicant)

Date

The Police Technician's Verbal Verification

I, the Police Technician, verbally verified with applicant that:

□ applicant's answer is "none"	OR	applicant listed complete & citation/arrest history
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Police Technician Initials_____ Date: _____

Applicant Acknowledgement of Police Technician's Verbal Verification: (APPLICANT: DO NOT SIGN BELOW UNTIL ASKED TO DO SO)

By initialing here, I, the named applicant, confirm that the Police Technician verbally verified my arrest history on this date:

Applicant Initials:

Date:

CITY OF SANTA BARBARA

APPLICANT ACKNOWLEDGEMENT: APPLICATION COMPLETION & PROCESS

Read each section below, then initial where indicated to confirm your acknowledgement and understanding of each section:

I understand that I should not submit my application to the Police Department if I am uncertain about ANY information listed herein, or if any information is incomplete. I understand that it is my responsibility to do all research necessary to ensure that my answers are complete and accurate.

In	itia	ls:

I understand that my application may be processed immediately upon submission to the Police Department, and that once it is submitted, if <u>any</u> information is found by Police Department staff to be missing, incomplete, misrepresented, or falsified, the application may be denied.

Initials: _____

I understand that the Police Department, at the discretion of Police Department staff, may accept this application without the immediate submission of the following supplemental items: drug test results; alcohol test results; and/or photographs. <u>I understand that if an incomplete application is</u> <u>accepted</u>, <u>I must submit any missing items within seven (7) days of submission of the incomplete</u> <u>application</u>. I understand that I will be ineligible for a temporary permit or any form of extension of driving privileges until such time as all missing items have been submitted, and will only then be eligible for a temporary permit if all items are received within 7 days of original submission. Although the initial application process and background check may begin immediately after submission of the application without these items, the application will not be reviewed by the Chief's Designee until all required supplemental items are submitted to the Police Department. If the supporting items are not submitted within 12 months of the date of submission of the application, the application will become void and a new application must be submitted.

Initials:_

By submitting this application to the Police Department, I confirm that I have included all information requested in all sections of the application, that I have done all research necessary to support the information listed, and that I am confident that the information I have provided is complete and accurate.

Initials:_____

I confirm that I have familiarized myself with Santa Barbara Municipal Code Chapter 5.29, particularly as it pertains to the rules, regulations, and requirements of being a taxicab driver.

Initials:_____

By signing below I confirm that I have thoroughly read, I understand, and I agree to abide by all sections I have initialed on this page.

Signature

Date