TAXICAB BUSINESS LICENSE NEW AND RENEWAL APPLICATION

Rochester Code of Ordinances, Chapter 5-5 applies to Taxicabs and Taxicab Driver licenses. A taxicab business is an entity owning and operating a minimum of ten taxicabs for hire, to or from any point in the city, with dispatch available. A taxicab business is required to operate pursuant to and in compliance with a franchise issued by the City to operate taxicabs in the city. A license is required annually for each vehicle operated under the authority of the franchise.

Instead of sending in this form, applications can be submitted online through the Accela Citizen Access portal. See the following instructions:

Register Public User Account (video): https://lf.rochestermn.gov/Documents/ElectronicFile.aspx?dbid=0&docid=761310
Applying for a New License (PDF): https://lf.rochestermn.gov/Documents/ElectronicFile.aspx?dbid=0&docid=1210117
Submitting a License Renewal (PDF): https://www.rochestermn.gov/Home/ShowDocument?id=25701

CHECKLIST OF REQUIRED ITEMS THAT MUST BE SUBMITTED WHEN APPLICATION IS SUBMITTED

☐ **1.** Fully complete all parts of the application and submit **ALL** pages including this checklist (*Every question must be answered – write 'N/A' or 'not applicable' if necessary on any questions*):
   ☐ License Application must be signed by the applicant or an owner/member/officer
   ☐ Addendum 1 completed with information on each vehicle to be licensed

☐ **2.** Annual license fee of $40 per vehicle - $40 x ___ (number of vehicles) = _____ (total license fee)
   - License fees are not prorated regardless of when issued during the course of the calendar year.
   - Renewal applications not submitted by Nov. 30 will incur a 20% late fee.
   - Renewal applications not submitted by Dec. 31 will incur a 50% late fee.

☐ **3.** Submit a copy of your current rates of fare card as kept in each car.

☐ **4.** Current vehicle annual inspection reports filed with the City Clerk – required for every vehicle, every year.

☐ **5.** Copy of insurance certificate of coverage for liability insurance covering each vehicle operated as a taxicab, having limits of not less than $300,000 for bodily injury to any one person, not less than $500,000 for injuries to more than one person which are sustained from the same accident, and not less than $50,000 for property damage resulting from any one accident, in accordance with RCO §95A.04 Subd. 1. – The certificate of insurance must list all vehicles covered.

-or-

File an indemnity bond or bonds having as surety thereon a surety company authorized to do business in the state of Minnesota, and conforming to the provisions of RCO §95A.04 relating to insurance. The bond(s) must be approved by the City Council.

☐ **6.** Proof of workers' compensation insurance coverage, or certification in Section C by applicant it is not required.

☐ **7**. List of all drivers submitted on Addendum 2.

ADDITIONAL STEPS TO BE COMPLETED BY THE CITY PRIOR TO ISSUING A LICENSE:

☐ **8.** Approval of the licenses by the City Council.

☐ **9.** Issuance of licenses and updated license plates for each vehicle once all other steps are complete.

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Fill in all blanks. Write N/A if a question is not applicable.

Licenses run on the calendar year, expiring on Dec. 31, and are not prorated.

Calendar Year Applying for:_____

Is this a renewal of an existing or previous license with the City of Rochester?
☐ YES ☐ NO **APPLICANT**

STEP 1. INFORMATION			
Please provide the following information about your business			
1. First Name		2. Last Name	
3. Primary Telephone Number	4. Type of Phone: ☐ Cell ☐ Business ☐ Home ☐ Other	5. Alternate Phone Number	6. Type of Phone: ☐ Cell ☐ Business ☐ Home ☐ Other
7. Email Address			
8. Mailing Address		9. City	10. State 11. Zip Code
12. Please send official notices relating to this license to: ☐Mailing Address ☐Email ☐Business Address		13. Role of person completing application: ☐Owner ☐Officer ☐Partner ☐Manager ☐Agent for the Owner ☐Other_____	
Information about primary point of contact for this license (if different than above)			
14. First Name		15. Last Name	
16. Primary Telephone Number	17. Type of Phone: ☐ Cell ☐ Business ☐ Home ☐ Other	18. Alternate Phone Number	19. Type of Phone: ☐ Cell ☐ Business ☐ Home ☐ Other
20. Email Address		21. Role of primary contact: ☐Owner ☐Officer ☐Partner ☐Manager ☐Agent for the Owner ☐Other_____	
License Holder Information			
Provide information about who this license will be issued to			
22. Business Federal Tax ID Number		23. Business State Tax ID Number	
24. Entity license will be issued to (Legal Corporate Name of Business including LLC, Inc., Co., etc., or, *only if sole proprietor*, name of individual)		25. Business Trade Name (DBA) if different than legal name	
26. Business Address		27. City	28. State 29. Zip Code
STEP 2. LICENSE INFORMATION			
License Details - attach additional sheets if necessary			
30. Type of Ownership: ☐Sole Proprietor ☐Corporation ☐LLC ☐ Partnership ☐Non Profit ☐Other_____		31. Date of Incorporation/ Organization	32. State of Inc./Org

33. Date Current Franchise Expires	34. Number of Vehicles to be Licensed	
35. Street Address of Dispatch Location in Rochester	36. Date of Last Update to Rates of Fare	37. Is your current rate card on file with the City Clerk? ☐ Yes ☐ No

STEP 3. BUSINESS DATA

Do you have the liability insurance required by RCO 95A.04 Subd. 1 covering each vehicle to be licensed for the term of the license? –
Please note, you must supply a certificate of insurance that lists out all insured vehicles.
☐ Yes ☐ No
If not, are you instead providing an indemnity bond or bonds meeting the requirements of RCO 95A.04 Subd. 2?
☐ Yes ☐ No

WORKER'S COMPENSATION INSURANCE

Workers' Compensation Company	Policy Number	Dates of Coverage

OR:

I certify that I am not required to carry workers' compensation insurance because:
☐ I am self-insured.
☐ I am the sole proprietor and I have no employees.
☐ I have no employees who are covered by workers' compensation law.
Only employees who are specifically exempted by statute are not covered by workers' compensation law. These include
spouse, parents, and children regardless of age. All other workers whose work is controllable by the employer must be covered.

STEP 4. DOCUMENTS TO ATTACH

- Addendum 1 listing all vehicles to be licensed
- Current inspection reports for each vehicle
- Addendum 2 listing all drivers to be licensed separately for the business
- Copy of current fare card
- Proof of Liability Insurance covering all licensed vehicles or indemnity bond
- Proof of Workers Comp insurance, if required

STEP 5. PAYMENT

SUBMIT THE REQUIRED LICENSE FEE WITH THIS APPLICATION

License fees are not prorated, and cover the license year being applied for, expiring on Dec. 31.

ANNUAL LICENSE FEE FOR THE PERIOD OF JAN. 1- DEC. 31: $40/vehicle
ADD: $8/vehicle late fee for renewals submitted between Dec. 1 and 31 of the license year.
ADD: $20/vehicle late fee for renewals submitted after Dec. 31 of the license year

Total paid: _____

STEP 6. VERIFICATION

Notice of Collection of Private Data

The information collected and required as part of a license application will be used to determine eligibility for a City of Rochester License or Permit. Disclosure of this information is voluntary. It is not legally required to provide requested data, however, failure to do so may mean the City of Rochester is unable to process this application.

Social Security Numbers and Birth Dates are classified as private data, and are not available to the public. Access to this data is limited to staff with a business need in order to determine license eligibility, and to administer and manage the licensing program.

Disclosure of a Social Security Number (or Individual Tax ID Number only for individuals without a social security number), and a Minnesota Tax ID Number is required by Minnesota Statutes 270C.72, and may be requested by and released to the Minnesota Commissioner of Revenue.

All other information contained in this application is public information upon submission pursuant to the Government Data Practices Act, Minnesota Statutes Chapter 13. Individuals have the right to see and obtain copies of the data maintained on them, including private data, and also have the right to be told the contents and meaning of the data, and to contest the accuracy and completeness of the data.

Notice of Ability to Sign up for Electronic Notifications of Proposed City Ordinances

As an applicant for a business license or renewal of an existing business license, you are also hereby notified that the City of Rochester distributes general city information and notices through an electronic notification system, and you may sign up to receive notices through this electronic notification system on the City's website at http://www.rochestermn.gov/i-want-to/sign-up-for/email-updates This includes notice of proposed ordinances at least 10 days prior to final adoption by the City Council in accordance with Minn. Stat. 415.19.

A SIGNATURE IS REQUIRED IN ORDER TO PROCESS YOUR LICENSE APPLICATION

I, (print name) _____, have read and understand the above information regarding my rights as a subject of government data. I acknowledge I have been provided information about what is required to obtain a business license from the City of Rochester, and how to receive notifications of proposed City ordinances. I agree I will strictly comply with all the laws of the State of Minnesota governing the taxation of business and all ordinances of the City of Rochester, and understand I can review all City ordinances on the City website or in the City Clerk's Office. I further understand that the giving of false information as part of this application, regardless of when it is discovered, and/or failure to give required pertinent information can constitute cause for denial, suspension, or revocation of my business license.

I attest I am an authorized corporate officer, partner, owner or agent for the business for which this application is being completed. I certify that I have read and understand every question in this application, and that the answer to every question is true to my knowledge, information and belief.

Signature of Applicant _____ Date _____

ROCHESTER

Minnesota

Office of the City Clerk

	MAKE	MODEL	YEAR	LICENSE PLATE OR REGISTRATION	VIN	MAX SEATING	CURRENT INSPECTION REPORT
1							
2							
3							
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17							

Last Updated: 12/21/2020

	LAST NAME	FIRST NAME	EMPLOYEE OR INDEPENDENT CONTRACTOR	DRIVER'S LICENSE NO.
	ADDENDUM 2. LIST OF DRIVERS – PAGE __ OF __			
1				
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3				
4				
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