



**CITY OF AUSTIN
AUSTIN TRANSPORTATION DEPARTMENT**

Application for Transportation Network Company Operating Authority

1. Service Name: _____ Telephone #: _____

Business Address: _____ Fax #: _____
Street City State Zip

Email Address _____

2. The following information must be provided for the applicant, each officer, director, partner, and any other person who will participate in the business decisions of or who has the authority to enter into agreements on behalf of the ground transportation service. This information is to be provided on a separate page and attached to the application.

Name: _____ Driver's License #: _____ State: _____

Address: _____ Telephone #: _____
Street City State Zip

Number of years of Texas residency: _____

Provide a description of all criminal convictions and submit a nationwide criminal history certified by the Texas Department of Public Safety. The certification of the criminal history information must have occurred within 30 days preceding the submission of the application.

3. Name of Insurance Co.: _____ Agent Name: _____

Agent Phone #: _____ Agent Insurance License #: _____

4. The applicant must provide the following information and attach as part of the application:

- a. Certified copies of any documents required by state law to be filed for the business entity to legally exist, and a statement from the Texas Secretary of State certifying that the business is in good standing if state law requires the entity to file documents with the Texas Secretary of State.
- b. A description of the applicant's ground transportation service experience.

- c. A detailed description of the proposed service.
- d. The proposed rate of fare.
- e. A certificate of insurance as proof of insurance coverage with the City of Austin listed as additionally insured.
- f. Accessibility plan.
- g. Driver training program.
- h. Policy on drug and alcohol use.
- i. An affidavit certifying that there are no outstanding judgements related to ground transportation service against a person described in Item #2 of this application.
- j. Provide a brief description of proposed trade dress and attach a photo or graphical depiction.

I, _____, applicant, do swear or affirm that all of the information included within this application is accurate, and I understand that any omitted information or information found to be inaccurate will result in the denial of this application for a Transportation Network Company operating authority or the revocation of a Transportation Network Company operating authority that is granted based on the information provided in this application. I also swear or affirm that I have read and understand Chapter 13-2 of the Austin City Code relating to Ground Transportation Services and agree to comply with the terms of a subsequent agreement as written and as may be amended.

Signature of Applicant

Date

THE STATE OF _____
COUNTY OF _____

BEFORE ME, the undersigned authority, on this day appeared _____, known to me to be the person whose name is signed to the foregoing application and duly sworn by me states under oath that he has read the said application and that all of the facts therein set forth are true and correct.

Sworn to before me, the ____ day of _____, 20__.

Notary Public