**FOR-HIRE DRIVER’S PERMIT APPLICATION INSTRUCTIONS**

**STEP 1. Contact WA State Dept. of Licensing**

Obtain WA State Chauffeur’s License

Business Licensing Service
Department of Licensing
PO Box 9034
Olympia, WA 98507-9034

360-664-1400

**STEP 2. Complete City Application.**

Complete Driver’s Permit application and return with required attachments (as noted on application) to Customer Service Department with appropriate license fees **Note: Criminal History, Fingerprinting & Photo fees are non-refundable**.

**New Application:**

Permit fee: $50.00

Criminal History $30.00

WSP/FBI Criminal - $34.75

 History Check

Photo: $ 5.00

**Total: $119.75**

**Annual Renewal:**

Permit fee: $50.00

Photo: $ 5.00

Local Criminal History: No Fee

**Total: $55.00**

**STEP 3. Visit Pasco Police Department (545-3421).**

1. Fingerprinting – Wed, Thu, Fri 10am-2pm (New Applications only).

2. Photograph (New and renewal).

**STEP 4. City Review Process.**

The application will be reviewed by the City and when all requirements are met, the application will be approved by the Customer Service Department and a Driver’s Permit card issued by the Police Dept.

**Upon issuance of Permit you may drive a For Hire Vehicle.**

**Questions?? Call Customer Service at 545-3402**

**\*KEEP THESE INSTRUCTIONS FOR FUTURE REFERENCE\***

5.08.060 INVESTIGATION AND CRIMINAL HISTORY CHECK - CHARACTER AND BUSINESS RESPONSIBILITY. The original copy of the application shall be referred to the Chief of Police, who shall promptly make an investigation of the applicant's character and business responsibility. Criminal history checks shall be performed in accordance with PMC 5.08.045. If the applicant's character or business responsibility is found to be unsatisfactory, the chief of police shall endorse on such application his disapproval and the reason therefore and return the application to the City Clerk. The City Clerk shall notify the applicant that his application is disapproved and that no license will be issued. If the Chief of Police finds that the applicant's character and business responsibility are satisfactory, he shall endorse his approval on the application and return it to the City Clerk, who shall, upon payment of the license fee and the filing of bond as provided for in this chapter, issue the license. (Ord. 4022, 2011; Prior code Sec. 3-8.24.)

5.45.090 DRIVER’S PERMIT - FEE. No person shall drive a For-Hire Vehicle within the City without first obtaining a Driver’s Permit. No Operator shall utilize a Driver who is not permitted as provided herein. Annual fee, as set forth in Chapter 3.07 of this code, shall accompany the application for the Permit. In all cases where an Operator desires to act as a Driver, he shall, in addition to the requirements for the Operator’s License, secure a Driver’s Permit. (Ord. 3938, 2009; Ord. 3858, 2008; Ord. 3335 Sec. 2, 1998.)

5.45.100 DRIVER’S PERMIT - QUALIFICATIONS. No person shall be issued a Driver’s Permit unless the person:

A) Is at least twenty-one (21) years of age and possesses a valid state driver’s license; and

B) Complies with all state laws and regulations relating to For-Hire Vehicles and provides a copy of such proof including but not limited to the following:

1. Proof of age – 21 years or older.

2. Valid State of Washington driver’s license.

3. Proof of UBI (independent contractor).

4. Proof of insurance (liability and property insurance) (independent contractor).

5. Proof of successfully completing a training course provided by the National Safety Council; or school licensed by the Workforce Training and Education Coordinating Board.

6. Proof of successfully having passed a written examination provided by the National Safety Council; or school licensed by the Workforce Training and Education Coordinating Board (applicable to limousine operators only and renewable every 3-years).

7. Copy of a medical certificate certifying the individual’s fitness as a chauffeur (renew every 3-years).

The applicant shall file with the City Clerk an application on a form furnished by the City Clerk, which shall be signed and sworn to by the applicant and which shall set forth the following facts concerning the applicant: Name, height, weight, color of hair and eyes, residence address, place and date of birth, length of time a resident in Pasco, whether a citizen or non-citizen, last place of employment, whether previously permitted and if so where and whether or not the Permit was ever suspended or revoked and for what cause, and such other information as the City Clerk may require. (RCW 28C.10, RCW 46.72., RCW 46.72A and RCW 81.72) (Ord. 3938, 2009; Ord. 3858, 2008; Ord. 3560 Sec. 39, 2002; Ord. 3335 Sec. 2, 1998.)

5.45.110 DRIVER’S PERMIT - REQUIREMENTS. Before a Driver’s Permit shall be issued, the applicant shall submit to and / or supply the following to the Pasco Police Department:

A) To being fingerprinted for a non-refundable fee as set forth in Chapter 3.07 of this code;

B) Photographed annually for a non-refundable fee as set forth in Chapter 3.07 of this code;

C) Driver’s check;

D) Criminal history check – annually for a one-time non-refundable fee as set forth in Chapter

3.07 (RCW 46.72, RCW 46.72A and RCW 81.72);

E) Health Department TB test results on an annual basis; and

F) Outstanding warrants check.

The Chief of Police shall notify the City Clerk with the approval or disapproval of the applicant's qualifications. (Ord. 3938, 2009; Ord. 3858, 2008; Ord. 3335 Sec. 2, 1998.)

5.45.130 DRIVER’S PERMIT - CARD. Upon the finding that the applicant has met the requirements of this chapter, the Chief of Police shall cause to be issued a card bearing the name and description, including an annual updated photo of the Driver, which card shall be carried on the Driver's person at all times when he is operating a For-Hire Vehicle. (Ord. 3858, 2008; Ord. 3560 Sec. 41, 2002; Ord. 3335 Sec. 2, 1998.)

3.07.050 BUSINESS LICENSES**:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| BB) | 1) | Driver’s Permit Fee | $50.00 | 5.45.090 |
|  | 3) | Photograph | $5.00 | 5.45.110 |
|  | 4) | WSP/FBI Criminal History Check | $34.75 | 5.08.060 |
|  | 5) | Criminal History Check | $30.00 | 5.45.110 |
|  |  |
| RCW 81.72.210**Local regulatory powers listed.** |  |

To protect the public health, safety, and welfare, cities, towns, counties, and port districts of the state may license, control, and regulate privately operated taxicab transportation services operating within their respective jurisdictions. The power to regulate includes:
(1) Regulating entry into the business of providing taxicab transportation services;
(2) Requiring a license to be purchased as a condition of operating a taxicab and the right to revoke, cancel, or refuse to reissue a license for failure to comply with regulatory requirements;
(3) Controlling the rates charged for providing taxicab transportation service and the manner in which rates are calculated and collected, including the establishment of zones as the basis for rates;
(4) Regulating the routes of taxicabs, including restricting access to airports;
(5) Establishing safety, equipment, and insurance requirements; and
(6) Any other requirements adopted to ensure safe and reliable taxicab service.

**Driver’s Permit Application**

Date of Application \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  New Application [ ]  Renewal

**1. Applicant Information:**

Legal Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_St\_\_\_Zip\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_St\_\_\_Zip\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex \_\_\_\_\_\_ Height \_\_\_\_\_\_\_ Weight \_\_\_\_\_\_\_ Eye Color \_\_\_\_\_\_\_\_\_ Hair Color \_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Are you a US Citizen, or, do you have a Visa permitting you to work in the U.S.? [ ] Yes [ ] No

 **\*If marked yes, a copy of valid Permanent Resident card or work permit needs to be included with application\***

Current Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City of Pasco Business License #\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Place of Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you had a previous Driver’s Permit? [ ] Yes [ ] No If so, where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was that permit ever suspended or revoked? [ ] Yes [ ] No If yes, why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Required Attachments:**

* Legible copy of your WA State Driver’s License –**for renewal bring Driver card**
* For-Hire Driver’s Addendum (new & renewal)
* Copy of Health Dept. TB test results (new & renewal)
* Copy of medical certificate certifying the individual’s fitness as a chauffeur (new & renewal every 3 yrs.)
* Proof of successfully completing a training course. (new only)
* Proof of successfully having passed a written examination (limousine operators only, new & renewal every 3 yrs.)
* Permanent Resident Card or Work Permit Card

**My Signature below certifies that the information provided on this application and any attachments is true and accurate. I understand I must comply with all City of Pasco codes and ordinances.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Signature Date**

**For-Hire Driver’s Addendum**

1. Have you ever been convicted of a felony? [ ] Yes [ ] No

 If yes, please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Under penalty of perjury

2. Are you now on bond or personal recognizance pending trial, appeal or sentence for any serious offense? [ ] Yes [ ] No

3. Are you the subject of an outstanding arrest warrant from any court for any crime? [ ] Yes [ ] No

4. Have you been confined in a mental health facility for more than fourteen days for

 treatment, or committed as criminally insane? [ ] Yes [ ] No

If you answered yes to any of the questions above, but believe you are nonetheless eligible for a permit, attach a list of dates and circumstances, including copies of any applicable pardons, certificates of rehabilitation, or court orders.

**My Signature below certifies that the information provided on this addendum is true and accurate.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Signature Date**

**AFFIDAVIT OF FOR-HIRE DRIVER’S MEDICAL FITNESS**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, declare that I am the business owner of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Washington, and do certify that my employee, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is medically fit as a for-hire driver.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Business Owner**\*MUST BE NOTARIZED\***

State of Washington

County of Franklin

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public