

## **CITY OF ENCINITAS**

Development Services Department 505 S. Vulcan Ave Encinitas, CA 92024 www.encinitasca.gov

Phone: 760-633-2708

Email: permits@encinitasca.gov

## APPLICATION ADDITIONAL CAB

If a Taxi Company has a current permit with the City, additional cabs can be added to their fleet without the necessity of applying for a new permit.

All fees associated with this application are non-refundable.

Fees:
-------

Cab \$64 per cab

## **How To Apply**

Complete and submit the following documents with appropriate fees:

- Certificate Insurance Must have combined single limit liability insurance, minimum \$1,000,000 per occurrence. <u>Certificate Holder</u> must list City of Encinitas, 505 S. Vulcan Ave., Encinitas, CA 92024; and <u>Description of Operations/Locations/Vehicles</u> must contain statement, "Certificate holder is named as additional insured."
- Taxi Inspection Form Complete one form for each cab. After background check approval, each cab will be inspected by the San Diego County Sheriff's Department.
- Taxi Meter Inspection Annual inspection of taxi meter on each cab, conducted by San Diego County Department of Agriculture, Weights and Measures.
- Vehicle Registration Provide one for each vehicle; issued by Department of Motor Vehicles.

Payments can be made by mail (check only), in person at City Hall (cash check or credit card) or by email <a href="mailto:permits@encinitasca.gov">permits@encinitasca.gov</a> (credit card only – a staff member will contact you for credit card details). Checks are payable to City of Encinitas.

Please allow a minimum four weeks processing time.

## **COMPANY INFORMATION:**

Permit Number:			
Company: Name:	DBA:		
Contact Person: First:	Middle:	Last:	
☐ By checking this box, I certify under property to the best of my knowledge. I und application or revocation of the permit. I amisuse of privileges or multiple complaints rand/or revocation of the permit.	erstand any false statements acknowledge I will adhere to t	or information are grounds for the conditions as stated on the	r denial of this ne permit. Any
Name:		Date:	