



SANTA MONICA BUSINESS LICENSE PEDICAB PERMIT APPLICATION INFORMATION

Business & Revenue Operations Division

P. O. Box 2200, Santa Monica, California 90407-2200

Phone: 310-458-8745 • FAX 310-451-3283

Email: business.license@smgov.net • www.smgov.net/businesslicense

Pedicab Operator/Company Permit

- Pedicab Operators must complete a business license application and include the following:

Pedicab Operator Permit Application	Pedicab Vehicle Permit Application
Copy of Accord Form, Providing Proof of Required Insurance - (\$1 million)	Copy of Rate/Fare Sheet to be Posted
Image of Trade Mark and Color Scheme	Business License Fee
Routes that will be traveled in either a map or narrative format	Permit Fees (see Fee Schedule Below)

After an application is received, the Pedicab Operator will be contacted to schedule a pedicab vehicle inspection. The completed Pedicab Operator permit applications will be forwarded to the City Traffic Engineer for review and approval within 48 hours of a completed application being submitted. (NOTE: Incomplete applications will not be accepted, and may be returned. An application is not complete until which time all required information is provided). Once the City Traffic Engineer has provided a signed approval, a business license will be issued. A Pedicab Operator may not begin operations until such time that the business license has been issued and then may only operate pedicabs that have been sealed with the Pedicab Vehicle Decal.

Pedicab Driver Permit

- Pedicab drivers must be **1)** 18 years of age or older, **2)** possess a valid California Driver's License, **3)** pass a Santa Monica Police Department background check, and **4)** be sponsored by a Pedicab Operator that is licensed by the City of Santa Monica.
- Pedicab Driver applicant must complete a business license application* and include the following:

Pedicab Driver Permit supplemental application	Copy of California Driver's License
Original H6, issued within the last 30 days from the California DMV	Business License Fee*
Bicycle Safety Training Certificate of Completion	Permit Fees (see Fee Schedule Below)
Two passport size (2" x 2") photos. <i>These must show the applicant's face from the neck up and free from obstructions such as sunglasses or hats.</i>	

After a completed Pedicab Driver Permit application is received, the Pedicab Driver's H6 report will be forwarded to the Santa Monica Police Department for review and approval. (NOTE: Incomplete applications will not be accepted, and may be returned. An application is not complete until which time all required information is provided). After the Police Department has provided a signed approval, a Pedicab Driver permit and business license will be issued. A Pedicab driver may not begin driving a pedicab in Santa Monica until such time that the business license and Pedicab Driver's permit have been issued and then may only operate pedicabs that have been sealed with the Pedicab Vehicle Decal for the sponsoring Pedicab company.

**A business license is not required for drivers that are employees, as defined by California state law, of the Pedicab operator.*

Fee Schedule

Fee Description	Operator	Driver	Vehicle Permit
New Permit	\$195.00	\$95.00	\$112.00
Renewal	\$195.00	\$95.00	\$51.00
Transfer	N/A	\$62.00	\$112.00
Replacement	N/A	\$28.00	\$36.00
Re-Inspection	N/A	N/A	\$28.00



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Official Use Only	
BL #	
Fees Paid: \$ _____	
Paid By:	
<input type="checkbox"/> Ca. <input type="checkbox"/> Ck <input type="checkbox"/> AMEX <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard	
Date Paid: _____	

Applicant Information

Applicant's name:				
<i>(As it appears on DMV Records)</i>				
First	Middle	Last		
Applicant's Physical Address:				
Number	Street	Unit/Suite #	City	State Zip
Phone: () —	Cell Phone: () —	Fax: () —		
Email:			DOB:	
Driver's License Number:		Exp. Date:	State Issued:	

Criminal Record

Have you been arrested for a crime in the last seven years, which resulted in conviction or plea of nolo contendere (no contest)? Yes No

If yes, enter the information below; if you need more room please attach a separate sheet:

_____	_____	_____	_____
<i>Date</i>	<i>City</i>	<i>Charge</i>	<i>Disposition</i>
_____	_____	_____	_____
<i>Date</i>	<i>City</i>	<i>Charge</i>	<i>Disposition</i>
_____	_____	_____	_____
<i>Date</i>	<i>City</i>	<i>Charge</i>	<i>Disposition</i>

Pedicab Operator Information *(To be completed by the company that intends to hire you)*

Company Name:	Business License #:
Hire Status <input type="checkbox"/> Independent Contractor (Business License Required) <input type="checkbox"/> Employee	
I certify that it is my intention to have the applicant named on this application operate as a Pedicab driver in the City of Santa Monica, and that to the best of my ability I have ensured that the applicant meets the requirements outlined in the Santa Monica Municipal Code and the Santa Monica Pedicab Rules. I understand the requirements of and, when applicable, will comply with J1 Visa requirements outlined in Title 22, Chapter I, Subchapter G, Subpart B, Section 62.32-Summer Work Travel issued by the Department of State.	
_____	_____
<i>Print Name</i>	<i>Title</i>
_____	_____
<i>Signature of Authorized Pedicab Company Representative</i>	<i>Date</i>

Acknowledgment and Confirmation

PEDICAB DRIVER APPLICANT CERTIFICATION

I certify that I am 18 years of age or older. _____(initials) I certify that possess a valid California Driver's License. _____(initials)

I acknowledge that I have read, understand and will follow the Santa Monica Pedicab Rules and Santa Monica Municipal Code Section 6.50. _____(initials)

I have attached an original H-6 form issued to me within the last 30 days by the California Department of Motor Vehicles. _____(initials)

I have attached two passport size color photo (2" x 2"), which shows my face free of obstructions. _____(initials)

I certify under penalty of perjury that all statements made in this application are, to the best of my knowledge, true and correct, and that I have completed this application. I authorize the City of Santa Monica to verify all statements and information provided on this application.

_____	_____	_____
<i>Signature</i>	<i>Title</i>	<i>Date</i>

CITY OF SANTA MONICA PEDICAB DRIVER APPLICATION