City of Burbank Community Development Department – Building & Safety Division

Taxi Company License Requirements

Vehicles

 Liability insurance showing coverage for all cabs in the following amounts and an Additional Insured Endorsements naming the City as additional insured for each Auto and General Liability policy (See next page for sample).

Automobile Liability \$ 500,000 combined single limit
General Liability \$ 1,000,000 per occurrence with a
\$2,000,000 aggregate. A reduced amount may be accepted
upon proof that the GL is an umbrella policy, provided the GL
lists auto as an underlying coverage.)

- DMV Vehicle Registration
- A signed Vehicle Safety Inspection Report from a third party ASE Certified Mechanic or AAA Approved Auto Repair Shop.
- Payment of annual license fee per cab

Drivers:

- Application endorsed by the driver's employer
- Payment of the annual business license fee plus the \$4.00 Public Accessibility Fee
- Copy of current California State Driver's License
- For new drivers, we need a completed LiveScan form
- Negative drug/alcohol test from a DOT-approved lab.
- K4 driving record from the DMV retrieved within 30 days prior.
- One 2" x 2" head and shoulder photo taken within past year.

After we have received and processed all of the documents, a new decal will be assigned to each cab. The decal and dashboard card will be issued to the company in July

ADDITIONAL INSURED ENDORSEMENT

| | Insurance Company: | | |
|---------------------|---|--|--|
| | endorsement modifies such insurance as is afforded by the provisions of No relating to the following: | | |
| 1. | The City of Burbank, 275 East Olive Avenue, Burbank, CA 91502, its officers, employees, agents and representatives are named as additional insureds ("additional insureds") with regard to liability and defense of suits arising from the operations and uses performed by or on behalf of the named insured. | | |
| 2. | With respect to claims arising out of the operations and uses performed by or on behalf of the named insured, such insurance as is afforded by this policy is primary and is not additional to or contributing with any other insurance carried by or for the benefit of the additional insureds. | | |
| 3. | This insurance applies separately to each insured against whom a claim is made or suit is brought except with respect to the company's limits of liability. The inclusion of any person or organization as an insured shall not affect any right which such person or organization would have as a claimant if not so included. | | |
| 4. | With respect to the additional insureds, this insurance shall not be cancelled, or materially reduced in coverage or limits except after thirty (30) days written notice has been given to the City of Burbank, Building Division, 150 North Third Street, Burbank, CA 91502. | | |
| - | pletion of the following, including countersignature, is required to this endorsement effective.) | | |
| Effect | tive, this endorsement forms a part of | | |
| Policy | y No Must Match Policy Number Above | | |
| Issue | d to: Named Insured | | |
| COUN | NTERSIGNED BY: | | |
| Printed Name:Title: | | | |

| Insurance Company Name: | | | | | | |
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