Consent: Item A

Consideration of the Minutes from the February 10, 2008 Taxicab Commission Meeting.
TAXICAB COMMISSION MINUTES

February 10, 2009 at 6:30 p.m.
City Hall, 1 Dr. Carlton B. Goodlett Place
Room 400

STAFF IN ATTENDENCE: Executive Secretary Tamara Odisho Benjamin – Taxi Commission, City
Attorney Tom Owen, Sergeant Ron Reynolds – SFPD-Detail

1. Call to Order/Roll Call - Absent Min Paek

2. Resolution to Recommend Allocation of the Driver Benefit Fund [INFORMATION and
DISCUSSION]
   - Mark Kelleher, Senior Director of Development at SF State: Overview of why Taxi Commission should
     create scholarship fund.
   - Director Thigpen: Is there a cost to the MTA through a tax?
   - Mark Kelleher: No tax from a non-profit to another non-profit.
   - Com Breslin: Is there any requirements for residency?
   - Mark Kelleher: None.
   - Com Breslin: In favor of a scholarship program but it would be favorable to have it for other schools.
   - Pres Gillespie: The resolution would also create a benefit to cover a portion of funeral costs for any driver
     killed on the job.

Public Comment:
   - Jane Bolig: How would the funeral fund be managed? Scholarship is a great idea.
   - Robert Cezzano: Great misgivings on the proposal and believes SFMTA will get confused on who this
     money will go to. Should give all the money to a scholarship fund.
   - Mark Kelleher: State law does not allow differentiating between make and/or female.
   - Tariq Mehmoord: The more important question is how much college tuition currently costs?
   - Mark Kelleher: Estimated costs for next year are $5,000 and fund would be perpetual.
   - Name: What if a driver gets hurt on the job but cannot drive again?
   - Pres Gillespie: Limited amount of money and would not be able to cover that type of accident.
   - Com Breslin: In the change section change language to scholarship to qualified deserving applicant. Under
     first resolved, add future funds to be divided equally in the future.
   - Pres Gillespie: City attorney recommended that we not suggest language on future funds. Will discuss
     language with the Executive Director and will present it at the next meeting.

3. Staff Report Commissioner Announcements
- Dir Thigpen: Overview of staff report.
- Sgt Reynolds: Overview of report.

Public Comment:
- Charles Rathbone: Prepared chart of dispatch reports.
- Tariq Mehmood: Last 2 meetings Commissioners have not done anything.

4. Consent Calendar [ACTION]
- Director Thigpen: Sever items B and C. items in D3-15 waiver of notice is required, D2, E3 and E5 for recusals.

Public Comment:
- Charles Rathbone: Welcome to B2-Douglas Wong and congratulations to E5-Orlando David
- Richard Hybels: Congratulations to E1-Bayramali Sen and E3- Sukhdev Attal
- Marty Smith: Welcomes E5-Orlando David to Luxor. Would like a refund for color scheme change from Delta to Luxor since it was waived for the other applicants.
- Com Breslin: Motion to waive notice for D3- D15
- Com Oneto: Second motion

Ayes: Benjamin, Breslin, Gillespie, Oneto, Suval, Tom  No: 0
Absent: Paek  Recuse: 0

- Com Oneto: Second motion.

Ayes: Benjamin, Breslin, Gillespie, Oneto, Suval, Tom  No: 0
Absent: Paek  Recuse: 0

- Com Oneto: Approve color scheme change to D2-Douglas Wong and grant medallion to E5- Orlando David.
- Com Suval: Second motion

Ayes: Breslin, Gillespie, Oneto, Suval, Tom  No: 0
Absent: Paek  Recuse: Benjamin

- Com Oneto: Motion to grant a medallion to E3- Sukhdev Attal
- Com Tom: Second motion.

Ayes: Benjamin, Breslin, Oneto, Suval, Tom  No: 0
Absent: Paek  Recuse: Gillespie

- Director Thigpen: Overview of Item B- Taxi Commission v Dev Narewatt
- Com Benjamin: Were there any waybills during the time he was working at his shop?
- Director Thigpen: Doesn’t remember what the hearing officer reviewed.
- Attorney for Dev Narewatt: The hearing officer did not review 3 years of waybills. You would have to assume GTU records are correct at all times. The decision refers to GTU declaration that seems like there was a transponder issue. March-September 2006 gap discrepancy is an issue.
- Dev Narewatt: Has receipts for waybill payments. Ten year taxi driver and purchased a new vehicle every 3 years. What am I being punished for? This is not fair. I work 7 days a week but no one wants to listen. Very popular driver and see them all the time at the airport. Has a shop but has a manager who runs the shop.
- Name: Has seen him for years at the airport. He is a hard working man.
Thomas George Williams: I was surprised to see Dev Narawat on here. Smart card is confusing, waybills get lost and transponders don’t work well. Airport records are not reliable.

Name: Knows this driver and he deserves a medallion.

Robert Cozzano: Doesn’t know this driver, but smart card is enormous issue. Smart cards do not have names on it.

Name: Knows this driver and always works on weekends and sees him at the airport, also uses his shop.

Name: Professional engineer has known Dev for 4 years and wishes others had his honesty and work ethics. He works at night and he has a mechanic shop.

Paul Grezan: Taxi driver and knows Dev is a legitimate driver.

Mike Dejami: Transponder is not working. Records from the cashier would be helpful to compare to his waybills. Smart cards option for 2-3 months allowed you to not use other exiting means.

Ahmed: Has known Dev for at least 10 years. Smart card is an issue. Drivers each have their own cards.

Vic Ridley: Smart card is fallible and has seen Dev driving.

Sayad Azad: Driving for over 19 years. Has seen him at the airport and in the City.

Camile Barkookie: Dev is a hard worker and he is not lying.

Tone Lee: Good driver. Told him to be aware of his place on this list and to begin driving again.

Ashwan Aea: Known Dev for over 20 years and as a driver for 10 years. Does have a shop but only works there during the days.

Gratch: There may be some airport discrepancy. He is a good driver and commission should contact company to get records.

Tariq Mehmoed: Shuttles that go to the airport use a transponder and would have been upset if they were improperly or incorrectly being charged by SFO for wrong transponder readings. Believes there are no issues with the transponders.

Pres Gillespie: Knows a really cab driver from a phony. Inclined to believe something happened with the GTU records and this case is worthy of being reheard. But it wouldn’t be by our Commission.

Com Benjamin: Hearing officer never reviewed 2005 waybills. Are transponders checked for accuracy? Specifically this transponder and other transponders? Motion to rehear this case with a letter sent to GTU for review of transponder and evidence.

Director Thigpen: Cannot say why she didn’t. SFO would have to answer these questions.

Com Brelslin: Second motion

Ayes: Benjamin, Breslin, Gillespie, Oneto, Suval, Tom

Absent: Paek

Recuse: 0

Director Thigpen: Overview of consent item C- Taxi Commission v Kalesiassie Gebresillassie

Com Benjamin: We have had previous problems with American Cab and production of waybills. Motion to continue the case

Kalesiassie Gebresillassie: Would be happy for a rehearing.

Public Comment:

Name: Thinks he has a very powerful argument including tax records and given problems at American Cab and a plausible case against them, should have an opportunity to present this again.

Com Oneto: Second motion

Ayes: Benjamin, Breslin, Gillespie, Oneto, Suval, Tom

Absent: Paek

Recuse: 0

5. Clean Air Taxi Program: Second Quarter Report [INFORMATION AND DISCUSSION]

Director Thigpen: Overview of numbers and there’s a 10% quarterly increase of clean vehicles. Commitment is great from industry.

Pres Gillespie: Commend mid-year commitment from companies. Two largest companies already under the goal, as are several other companies, great news. Companies not in compliance cannot bring in any more gas vehicles. Every company must meet 1/3 reduction every year until 2011. Will present a resolution at next meeting reviewing goals.

Public Comment:

Mark Gruberg: Believes the commission’s numbers for Green Cab are incorrect.
• **Director Thigpen:** If the Commission has made an error it will make the change.


• **Director Thigpen:** Overview of the case
• **Jessie Ralph, Attorney for Tu Lam:** Reviews facts of case.
• **Director Thigpen:** Rebuttal
• **Jessie Ralph, Attorney for Tu Lam:** Rebuttal

**Public Comment:** None

• **Pres Gillespie:** Commission needs to deliberate the issue. Union Cab was a company that allowed medallion holders to operate their medallion without requiring medallion holders to drive. Lack of evidence that Mr. Lam was a real driver. Town Taxi admits there were no waybills. Although he has driven in 2008, there is no evidence he drove in the previous years.
• **Com Breslin:** Strong supporter of revocation but should both the A card and medallion be revoked?
• **Pres Gillespie:** Serious offense and should revoke both A card and medallion.
• **Com Benjamin:** Only 2 days on the waybills missing 2 lines on each waybill. It’s hard to believe that you were able to have that many pick ups while operating your vehicle. Brings question to mind since other waybills are not so completely filled out.
• **Com Tom:** Taxi industry is not the last resort and not finding another job is not compelling.
• **Com Breslin:** Missing payments are small but this was his second chance and he should have stuck to his plan. Ownership of the medallion is subject and not because of the driving requirement, I am hesitant to revoke the A card but not the medallion.
• **Pres Gillespie:** Doesn’t want to take away his means of making money but believes he has forfeited his right to hold a medallion.
• **Com Oneto:** Issue here is that he has not shown any responsibility to hold an A card or medallion. He collected profit for years from Mr. Me. This is years of fraud.
• **Com Benjamin:** Agree and not convinced any of his waybills are real. Signature different on each waybill. Is he on any Town Taxi rosters?
• **Director Thigpen:** Did not spend resources to review the waybills, but Town Taxi did not have him scheduled on the roster.
• **Com Oneto:** Motion to revoke medallion and A card
• **Com Benjamin:** Second motion.
• **Com Breslin:** Doesn’t present a safety hazard and can drive in other jurisdictions and can reapply in San Francisco next year.
• **Com Tom:** Would the Commission cash the checks?
• **Director Thigpen:** It is up to you.
• **Com Oneto:** The settlement agreement is void if we revoke his A card and medallion. Commission to return recent check.

Ayes: Benjamin, Breslin, Gillespie, Oneto, Suval, Tom  
No: 0  
Absent: Paek  
Recuse: 0

**SPECIAL ORDER 8:00-8:30 PM**

7. **Public Comment (Please limit public comment to items NOT on the agenda)**
• **Charles Rathbone:** Presented a copy of Luxor proposal for medallion auctions.
• **Richard Hybels:** Spoke with Malcolm Heinicke and he will consider modifying his proposal. Is up hauled to have to buy back his medallion.
- **Zamja Douwe**: This is like a liquor license. The City wouldn’t take away a businesses license and shouldn’t do it with medallions unless someone is violating the rules.

- **Mustafa**: Driver for 21 years, feeding 7 members of his family. Should have a mutually beneficial program.

- **Robert Cezzano**: The end of this Commission will be taken over to the MTA. Thanks Jordanna for ADA letter. Drivers should apply early.

- **Name**: Received a medallion and it’s precious to him. Worked hard for this and auctioning off would be a death warrant for him.

- **Mike Spain**: Charter Reform meeting proposals said that the Taxi Commission was supposed to review proposal.

- **Glen Mack**: Cost of living has gone up but not meters. Buying power is less and can’t raise a family on this income.

- **Jane Bolig**: No transfer proposal will work unless all interested parties are considered.

- **Zuhair**: Seems like this is being planned very well. Merger with SFMTA and auctioning selling these medallions.

- **Steven Lee**: Was on the previous calendar and wants to know what the delay is.

- **Tone Lee**: Game is over and party is over as well. When 2005 rule changed reminded that he should continue driving. It is not fair that he won’t be able to get a medallion because he is a MUNI driver.

- **Name**: Has known Steven Lee for many years and he is a good driver.

- **Rahimi**: Driver since 1982 and for waybill violations has been removed from the industry.

- **Calvin Wong**: Here to support Steven Lee. There was no rule that if he worked for MUNI he cannot get a medallion. It is not fair. Should be reconsidered.

- **Chris Franko**: Known Steven Lee and wants to support him to receive a medallion.

- **Name**: Hard to believe that medallions will be auctioned off. No union, or medical benefits. Consideration should be put to the voters.

- **Name**: Hopes Steven Lee will get his medallion.

- **Name**: Steve Lee has been a driver for years and should be considered for a medallion.

- **Steven Web**: Know very few drivers that can come up with money to buy a medallion.

- **Name**: Got his medallion last year after waiting 15 years and it’s hurtful.

- **Carl Macmurdor**: Malcolm withdrew auction plan. Hopes commission allows ADA applications to come in late.

- **Myriah**: Likes Prop K and would like it to stay. But if drivers can buy medallions would do so if names on the list are offered a medallion.

- **Bill Mounsey**: Name on the list and will suffer if medallion list won’t be used.

- **Thomas George Williams**: Was a member of Charter Reform working group and at last vote, change was considered. Real danger comes from the mayor’s office. Wants to sell drivers out to bail out drivers.

- **Name**: Has been on the list since 1994 and was told that it would be a 10 year wait. That’s why all these drivers have signed up to receive a medallion. This auction would take away our right.

- **Barry Kornegold**: Recently received his medallion and has concern for drivers on the list.

- **Mary Maguire**: If the proposal is withdrawn it’s only in its present form. Do any of the proposals increase or improve taxi service?

- **Peter Witt**: See attached 150 words

- **Tariq Mehmood**: There is sympathy for drivers. Work will go on.

- **Ruah Grafis**: City is in a budget crisis but drivers have union wage, health care and other benefits.

- **Mark Gruberg**: A pandora’s box was opened by the Mayor. All money driven on the mayor’s part and for those who want to sell it.

- **Robert**: Father was a taxi driver who supported family on income. Business has been less than it’s ever been.

8. **Resolution to Recommend Draft SFMTA Rules on Medallion Leasing [ACTION]**

- **Com Oneto**: Wanted the Commission to change their own rules before the merger so that the leases could be on file. Would like to adopt this resolution and to urge SFMTA to adopt it as well. This is not changing lease agreements.

- **Com Breslin**: Can vote on this tonight and vote on the other next week.

**Public Comment:**
• Tariq Mehood: There are drivers who have 2 separate leases with different companies and I'm not talking about brokers.
• Mark Gruberg: Is this for a long term lease? They have very different contracts.
• Com Oneto: Motion to adopt resolution
• Com Suval: Second motion

Ayes: Breslin, Gillespie, Oneto, Suval, Tom
No: Benjamin
Absent: Paek
Recuse: 0

9. Adjournment
Consent: Item B

Consideration of the Taxi Commission to grant a Taxicab or Ramp Taxicab Medallion Holder Permit to:

<table>
<thead>
<tr>
<th>Applicant:</th>
<th>Color Scheme:</th>
<th>Medallion Type:</th>
<th>Background Check:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Richard B. Beal</td>
<td>Luxor Cab</td>
<td>Ramp</td>
<td>Cleared</td>
</tr>
<tr>
<td>2. James Sukovitzen**</td>
<td>Luxor Cab</td>
<td>Alt. Fuel</td>
<td>Cleared</td>
</tr>
<tr>
<td>3. Varinder Singh</td>
<td>Town Taxi</td>
<td>Alt. Fuel</td>
<td>Cleared</td>
</tr>
<tr>
<td>4. Eugene Samsonov*</td>
<td>Town Taxi</td>
<td>Alt. Fuel</td>
<td>Cleared</td>
</tr>
<tr>
<td>5. Marcelos Fonseca*</td>
<td>Yellow Cab</td>
<td>Alt. Fuel</td>
<td>Cleared</td>
</tr>
<tr>
<td>7. Raed Sweis</td>
<td>DeSoto Cab</td>
<td>Alt. Fuel</td>
<td>Cleared</td>
</tr>
<tr>
<td>8. Ghanem M. Elmashni*</td>
<td>Regents</td>
<td>Alt. Fuel</td>
<td>Pending Clearance</td>
</tr>
<tr>
<td>9. Leonid Dolinsky**</td>
<td>United Cab</td>
<td>Alt. Fuel</td>
<td>Cleared</td>
</tr>
</tbody>
</table>

*Commission would be required to waive Notice rule
**Continued from January 27, 2009
MEMORANDUM

To: Honorable Commissioners
From: Jordanna Thigpen
Date: February 18, 2009
Re: Consent Calendar: Item B Medallion Applicants

B1: Richard Beal, Ramp
2005: 236 shifts
2006: 223 shifts
2007: 216 shifts
2008: 192 shifts

B2: James N. Sukoviten, Alternative Fuel
2005: 840 hours
2006: 840 hours
2007: 850 hours
2008: 920 hours
  o Mr. Sukoviten is currently driving on a temporary A-Card.
  o His A-Card was revoked on May 1, 2008 for Non-Payment.
  o Mr. Sukoviten received a temporary A-Card on July 31, 2008 and drove from January 1 – July 30, 2008 with an expired A-Card.
  o MPC §1078(a) states, No person shall drive or operate any motor vehicle for hire on the public streets of the City and County of San Francisco without a permit issued by the Taxi Commission authorizing such driving or operation in accordance with the provisions of this Article. Mr. Rudsari operated a motor vehicle for hire without a permit issued by the Taxi Commission authorizing such operation.
  o MPC §1089(a) states, It shall be unlawful for any person to act as a driver of any motor vehicle for hire licensed pursuant to this Article unless that person holds a driver’s permit from the Taxi Commission issued pursuant to this Section.
  o Mr. Sukoviten operated a motor vehicle for hire without a valid permit.
  o The Commission allows the month of January as a grace period to renew A-Cards.

B3: Varinder Singh, Alternative Fuel
2005: 252 shifts
2006: 289 shifts
2007: 276 shifts
2008: 293 shifts
B4: Eugene Samsonov, Alternative Fuel
2005: 940 hours
2006: 1180 hours
2007: 1250 hours
2008: 1270 hours

B5: Marcelos Fonseca, Alternative Fuel
2005: 1278 hours
2006: 1127 hours
2007: 1328 hours
2008: 1690 hours

B6: Elias Negash, Alternative Fuel
2005: 830 hours
2006: 810 hours
2007: 820 hours
2008: 810 hours

B7: Raed Sweis, Alternative Fuel
2006: 175 shifts
2007: 912 hours
2008: 1192 hours
2009: 21 shifts
*Per the Daly/Ma amendments to the full-time driving requirement (Ordinance 58-08), applicants may drive a prorated number of shifts or hours for the year 2009.

B8: Ghanem M. Elmashni, Alternative Fuel
2005: 271 shifts
2006: 292 shifts
2007: 279 shifts
2008: 258 shifts

B9: Leonid Dolinsky, Alternative Fuel
2006: 860 hours
2007: 1000 hours
2008: 950 hours
2009: 80 hours
*Per the Daly/Ma amendments to the full-time driving requirement (Ordinance 58-08), applicants may drive a prorated number of shifts or hours for the year 2009.
PC&N TAXICAB/RAMP TAXI PERMIT APPLICATION
San Francisco Taxicab Commission

Applicant's Name (First, Middle, Last):
Richard Benjamin Beal

Type of Medallion Applying for:
☐ Regular  ☑ Ramp

Residence Address (Street Address, City, State, Zip):
2330 Jerrold Ave, S.F., CA 94124

Mailing Address (if different than residence address):
F  CA 94109

Residence Phone Number: 2-4
Alternate Phone Number:
Hours Available at this Number: 2-4
Other name(s) used:

Sex: M  Height: 6'1"

California Driver's License Number / Expiration Year: [redacted]

Date of Birth: 11/91

Place of birth: Washington, D.C.

Hair Color: Brown

Eye Color: Blue

Color Scheme / Business Name:
Luxor Cab

Business Number:
(415) 283-1241

Are you a U.S. Citizen? ☑ Yes  ☐ No

Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)? ☑ Yes  ☐ No

What date was your permit (A-Card) first issued: 11/91

Permit #: P44-059834

Has this permit ever been revoked? ☐ No  ☑ Yes, if yes, explain:

Taxi driver, Boston, MA

Were you previously a medallion holder? ☑ Yes  ☐ No, Medallion # [redacted] If you answered 'Yes' to the previous question, was the medallion permit ever revoked? ☐ No  ☑ Yes, If yes, explain for what cause:

Please describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):

I have been a cab driver for 25 years (8 in Boston and 17 in S.F.) and I believe I am a good and effective provider of cab service to the public.
I have driven a taxicab in the City of San Francisco and I meet the current year’s driving requirement pursuant to SFPD Municipal Police Code Section 1121(b).  □ Yes  □ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 2003</td>
<td>Present</td>
<td>S.F., CA 94109</td>
</tr>
</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco? 17 years 0 months
How many years driving experience do you have in San Francisco? 17 years 0 months
Are you physically qualified to drive a standard vehicle safely? □ Yes  □ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/04</td>
<td>Present</td>
<td>Luxor Cab</td>
<td>2380 Jewett Ave, S.F., CA 94109</td>
<td>Cab Driver</td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime? □ No  □ Yes, if yes, provide the information required below. (Attach additional pages if needed)

Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit.

<table>
<thead>
<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
</tr>
</thead>
</table>

Is your eyesight impaired? □ Yes  □ No
Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired? □ Yes  □ No

Do you have any physical impairments? □ No  □ Yes, if yes describe the impairment:

<table>
<thead>
<tr>
<th>Have you ever had:</th>
<th>Epilepsy</th>
<th>□ Yes  □ No</th>
<th>Vertigo</th>
<th>□ Yes  □ No</th>
<th>Heart Trouble</th>
<th>□ Yes  □ No</th>
</tr>
</thead>
</table>

Are you now, or have you ever been, Addicted to the use of intoxicating liquor? □ Yes  □ No
Any Narcotic Drug? □ Yes  □ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? □ Yes □ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e., state existing radio cab company, detail information about new service, other)

Luxor cab radio is, I believe, the best cab dispatch service in San Francisco.

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? □ Yes □ No

If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? □ Yes □ No

Read each section and sign initials to the left of each section if you agree and understand.

I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

I understand that there may be sections of the San Francisco Municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sfgov.org. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this 21, 2007 day of January 2009 at San Francisco, California.

[Signature of Applicant]

RECEIVED

JAN 3 2 2009

SAN FRANCISCO
TAXI COMMISSION
Richard Benjamin Beal

S F, CA 94109

Luxor Cabs
2230 Terrolo Ave., SF, CA

(415) 292-4141

I have been with Luxor for five years now and very much like the radio service and the management.

Richard Benjamin Beal

Executed on January 21, 2009 at San Francisco, California.

Thomas J. Stanchellini

Operations Manager

Luxor Cabs

Received 1-20-09

San Francisco Taxicab Commission

Office Use Only:

Date:

Amount:

Accts.

Name:

Date:

Number:

Accts.

Name:

Date:

Number:

Accts.

Name:

Date:

Number:

Accts.

Name:

Date:

Number:
RECEIVED
JAN 3 2009
SAN FRANCISCO
TAX COMMISSION

ISSUED BY
OFFICE OF THE TREASURER & TAX COLLECTOR
PUBLIC PASSENGER VEHICLE DRIVER

EXPIRES: DECEMBER 31, 2009

BEAL III
P44-059834 LUXOR CAB

The above named person is licensed as a Public Passenger Vehicle Driver in accordance with the Municipal Police Code, Article 1, Sections 2.26.1 and 2.27.1 and Article 16, Section 1089.

CALIFORNIA
DRIVER LICENSE
CLASS: C

RICHARD BENJAMIN BEAL III
ANNAPOLIS, MD 21409
SEX: M  HAIR: BRN  EYES: BLK
HT: 6-01  WT: 170
RSTR: CORR LENS
February 12, 2009

Jordanna Thigpen, Acting Executive Director
SF Taxi Commission
25 Van Ness, Suite 420
San Francisco CA 94102

Dear Ms. Thigpen:

On February 6, 2009, the PCC Advisory committee to the SF Taxi Commission interviewed Richard Beal.

**Summary of Review Categories:**

Knowledge/experience with methods of facilitating safe taxi transport of disabled passengers: Satisfactory

Experience driving a ramp taxi/knowledge of equipment: Satisfactory

Commitment to use the ramp taxi medallion in a manner that will serve the disabled community: Satisfactory

**Comments/Concerns:**

**Recommendation:**

The PCC Advisory committee is pleased to recommend Mr. Beal for the ramp taxi medallion based on the general criteria listed above.

Please let me know if further action is required by the PCC at this time. I can be reached at 701-5331.

Sincerely,

Jeffrey Banks, Accessibility Projects Coordinator

cc: Griff Humphrey, PCC Advisory Committee Vice Chair
This certifies that

Richard Beal has successfully completed the requirements for Ramp Taxi Operators Training, on this third day of November, 2010.

Valid through November, 2010

Cheryl Domingo
Certified Ramp Test Pass Trainer

Laurie Graham
Certified Ramp Test Pass Trainer
We need more cabs on the road, we need good drivers like me. I play the luxor radios in the neighborhoods, put up with chaos and 1000's of elderly. I also have a perfect driving record and no complaints. Plus, I work for the #1 cab company.
I have driven a taxicab in the City of San Francisco and I meet the current year's driving requirement pursuant to SFPD Municipal Police Code Section 1121(b). ☑ Yes ☐ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995</td>
<td>NOW</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco?  58 years months
How many years driving experience do you have in San Francisco?  25 years months
Are you physically qualified to drive a standard vehicle safely? ☑ Yes ☐ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>NOW</td>
<td>LUXOR</td>
<td>2900 Gerald</td>
<td>Driver</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime? ☑ Yes ☐ No

Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit.

<table>
<thead>
<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1971</td>
<td>S.F.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Is your eyesight impaired? ☑ Yes ☐ No

Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired? ☑ Yes ☐ No

Do you have any physical impairments? ☑ No ☐ Yes, if yes describe the impairment:

Have you ever had: Epilepsy ☑ Yes ☐ No Vertigo ☑ Yes ☐ No Heart Trouble ☑ Yes ☐ No

Are you now, or have you ever been, Addicted to the use of intoxicating liquor? ☑ Yes ☐ No Any Narcotic Drug? ☑ Yes ☐ No

Were you previously a medallion holder? ☑ No ☐ Yes, if yes, was the medallion permit ever revoked? ☑ No ☐ Yes, if yes, was revoked, explain for what cause:
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? ☑ Yes ☐ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e. state existing radio cab company, detail information about new service, other)

I drive with Luxor who has a complete GPS system/computer.

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? ☑ Yes ☐ No

If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? ☑ Yes ☐ No

Read each section and sign initials to the left of each section if you agree and understand.

☒ I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

☒ I understand that there may be sections of the San Francisco municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sf.gov.org. If a Letter of Intent Is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

☒ I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this ___/08/09 day of January, 2009 at San Francisco, California.

[Signature of Applicant]

RECEIVED

JAN 08 2009

SAN FRANCISCO
TAXI COMMISSION
COLOR SCHEME DESIGNATION APPLICATION
San Francisco Taxicab Commission

*YOU MUST SUBMIT A CERTIFICATE OF WORKER'S COMPENSATION, REGISTRATION CARD, & INSURANCE CARD WITH THIS APPLICATION.*

PLEASE PRINT CLEARLY – COMPLETE ENTIRE FORM

Applicant's Name (first, middle, last)  
JAMES NOEL SUKOVITZEN

Residence Address (Street Address, City, State, Zip)  
211, SF, CA

Mailing Address, if different from above (Street Address, City, State, Zip)

Name of Taxi Company  
LUXOR CAB

Business Address of Taxi Company (Street Address, City, State, Zip)  
2230 JERROLD, SF, CA 94124

Business Phone (AIS)  
282-4141

Medallion Number

Owner / Operator

Gas & Gats

Long Term Lease

If this color scheme request is granted by the Taxicab Commission, list what the taxi company name, address and phone number will be:

Name of Taxi Company  
LUXOR CAB

Business Address of Taxi Company (Street Address, City, State, Zip)  
2230 JERROLD, SF, CA 94124

Business Phone (AIS)  
282-4141

Medallion Number

Owner / Operator

Gas & Gats

Long Term Lease

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

Because Luxor Cab is the #1 Company and gives the best service to San Francisco. Has the best radio – best drivers.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on JAN. 8TH, 2009 at San Francisco, California

JAMES SUKOVITZEN
Print Name of Applicant

Jan 8 2009

signature of Applicant

Name of person authorized to sign for Color Scheme Holder:

THOMAS J. STANGHELLIN

Title: Operations Manager

LUXOR CAB

Color Scheme Name

I, the Color Scheme Holder / person authorized to sign for the Color Scheme Holder hereby give consent to the applicant named to use my color scheme.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Color Scheme Holder / person authorized to sign for Color Scheme Holder

THOMAS J. STANGHELLIN

Date

1-8-2009

Agenda Notice Date

Hearing Date

Decision of Taxicab Commission

New Declaration Signed

Worker's Comp Submitted

Insurance Submitted

Paint Chips Submitted

Photos Submitted

Received by:

Receipt No.

Amount

Date
SAN FRANCISCO POLICE DEPARTMENT
TAXICAB DETAIL

TEMPORARY PERMIT

Permission is hereby given to JAMES N. SUKOVITZEN to operate as a "Driver
Public Passenger Vehicle" for LEXUS Taxicab Company.

This temporary permit expires at 5:00 p.m. on 6-31-09.

Issued on behalf of the San Francisco Taxicab Commission by

of the San Francisco Police Taxicab Enforcement Unit.

Date of Issuance 7-31-09

RECEIVED
JAN 09 2009
SAN FRANCISCO
TAXI COMMISSION

CALIFORNIA
DRIVER LICENSE

850 Bryant Street, San Francisco, CA 94103 • Phone (415) 553-9844 • Fax (415) 553-7369
TLA2 ACCT. NO: P44 054814 TAX ID - CENSUS 052322
DBA LUXOR CAB CERTIF NBR DATE STARTED 07-15-02
SITU 0000 VARIOUS LOCATIONS 0000 DATE INACTIVATED 05-01-09
OWNER SUKOVITZEN, JAMES NOEL CARE OF
ADDRESS : SAN FRANCISCO, CA 94115
CONDOMINIUM DISTRICT CODE NON-MATCHING ADDRESS UNIT COUNT
PERMIT NO. 068540 SUB-CLASS DESC. DRIVER-PUB.PASS.VEH. ACCOUNT TYPE A
COMMENT: REVOKED NONPAYMENT
EXPIRE DTE - - - - - - 12-31-07 12-31-06
DATE PAID - - - - - - 04-30-07 04-27-06
BATCH NO 0625 0016
ISSUE DT 00-00-00 00-00-00 00-00-00 05-04-07 04-28-06
DUE: FEE 52.00 51.00
SURCHRG 3.00 9.00
MISC. 11.75 11.50
TOTAL 66.75 71.50
PAID: FEE 52.00 51.00
SURCHRG 3.00 9.00
MISC. 11.75 11.50
TOTAL 66.75 71.50
BALANCE 0.00 0.00
P44 054814 RECORD RETRIEVED - ENTER CLASS-ACCOUNT FOR NEXT RECORD
<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant's Name (First, Middle, Last)</td>
<td>Varinder Singh</td>
</tr>
<tr>
<td>Residence Address (Street Address, City, State, Zip)</td>
<td>123 Main St, San Jose, CA 94587</td>
</tr>
<tr>
<td>Mailing Address (if different than residence address)</td>
<td>SAME</td>
</tr>
<tr>
<td>Residence Phone Number</td>
<td></td>
</tr>
<tr>
<td>Alternate Phone Number</td>
<td></td>
</tr>
<tr>
<td>Hours Available at this Number</td>
<td>24/7 to 24/7</td>
</tr>
<tr>
<td>Alternate Hours Available at this Number</td>
<td>24/7 to 24/7</td>
</tr>
<tr>
<td>Social Security Number</td>
<td></td>
</tr>
<tr>
<td>Other name(s) used</td>
<td>None</td>
</tr>
<tr>
<td>California Disability Number / Expiration Year</td>
<td></td>
</tr>
<tr>
<td>Date of Birth</td>
<td></td>
</tr>
<tr>
<td>Place of Birth</td>
<td>India</td>
</tr>
<tr>
<td>Race (Optional)</td>
<td>Asian Indian</td>
</tr>
<tr>
<td>Sex</td>
<td>Male</td>
</tr>
<tr>
<td>Height</td>
<td>5'6&quot;</td>
</tr>
<tr>
<td>Weight</td>
<td>140 lbs</td>
</tr>
<tr>
<td>Eye Color</td>
<td>BLK</td>
</tr>
<tr>
<td>Hair Color</td>
<td>BLK</td>
</tr>
<tr>
<td>Color Scheme / Business Name</td>
<td>Town Taxi</td>
</tr>
<tr>
<td>Color Scheme / Business Address (Street Address, City, State, Zip)</td>
<td>999 Pennsylvania Ave, SF, CA 94017</td>
</tr>
<tr>
<td>Are you a U.S. Citizen?</td>
<td>Yes</td>
</tr>
<tr>
<td>Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)?</td>
<td>Yes</td>
</tr>
<tr>
<td>What date was your permit (A-Card) first issued?</td>
<td>Feb 1992 Permit #: P44-04-4686</td>
</tr>
<tr>
<td>Has this permit ever been revoked?</td>
<td>No</td>
</tr>
<tr>
<td>Does MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere?</td>
<td>No</td>
</tr>
<tr>
<td>Are you previously a medallion holder?</td>
<td>No</td>
</tr>
<tr>
<td>Medallion #</td>
<td>N/A</td>
</tr>
<tr>
<td>If you answered 'Yes' to the previous question, was the medallion permit ever revoked?</td>
<td>No</td>
</tr>
<tr>
<td>Yes, if yes, explain:</td>
<td></td>
</tr>
<tr>
<td>Ease describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):</td>
<td>San Francisco is always busy for business and tourism. They always need cabs in the neighborhood, hotels, airport, and in the downtown area. I have been driving taxis for a long time. SF needs always experienced taxi drivers.</td>
</tr>
</tbody>
</table>

**OFFICE USE ONLY**

Formal Date: 2014-01-21
I have driven a taxi cab in the City of San Francisco and I meet the current year's driving requirement pursuant to SFPD Municipal Police Code Section 1121(b).  □ Yes  □ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 1999</td>
<td>Present</td>
<td>Union City, CA 94587</td>
</tr>
</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco? 20 years 3 months

How many years driving experience do you have in San Francisco? 18 years 11 months

Are you physically qualified to drive a standard vehicle safely? □ Yes  □ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
<td>Present</td>
<td>Town Taxi</td>
<td>919 Pennsylvania Ave, SF, CA 94107</td>
<td>Cab Driver</td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime? □ Yes  □ No

Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit.

<table>
<thead>
<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Is your eyesight impaired?  □ Yes  □ No

Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired?  □ Yes  □ No

Do you have any physical impairments?  □ Yes  □ No

Do you have any physical impairments?  □ Yes, if yes describe the impairment:

Have you ever had:  
- Epilepsy □ Yes  □ No
- Vertigo □ Yes  □ No
- Heart Trouble □ Yes  □ No

Are you now, or have you ever been, 
- Addicted to the use of intoxicating liquor?  □ Yes  □ No
- Any Narcotic Drug?  □ Yes  □ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service?  Yes □ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e. state existing radio cab company, detail information about new service, etc.)

Town Taxi Dispatch 24 Hours Radio Dispatch

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal?  Yes □ No
If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the Interior and exterior of your taxicab?  Yes □ No

Read each section and sign initials to the left of each section if you agree and understand.

Yes □ I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

Yes □ I understand that there may be sections of the San Francisco municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sfgov.org. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

Yes □ I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this 1st day of February, 2009 at San Francisco, California.

Signature of Applicant
Please print clearly -- complete entire form

Applicant Name (First, Middle, Last)  VARINDER SINGH

Residence Address (Street Address, City, State, Zip)  COURT, UNION CITY, CA 94587

Mailing Address, if different from above (Street Address, City, State, Zip)  SAME

If this color scheme request is granted by the Taxi Cab Commission, list what the taxi company name, address and phone number will be:

Name of Taxi Company  TOWN TAXI

Business Address of Taxi Company (Street Address, City, State, Zip)  999 VERNON WAY AVE, SF, CA 94107

Business Phone  (415) 401-8700

Medallion Number  UNKNOWN

☑ Owner/Operator  ☐ Gas & Data  ☐ Long Term Lease

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

I have been driving with this cab co. for last ten years. Good dispatch throughout the city.

RECEIVED

EXECUTED

FEB 4, 2009

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on  FEB 01, 2009 at San Francisco, California.

Signature of Applicant  VARINDER SINGH

[Signature]

[Print Name of Applicant]

[Print Name of Applicant]

Name of person authorized to sign for Color Scheme Holder:

Tatoo Mayzel

Title  Manager

Color Scheme Name  SF Town Taxi

I, the Color Scheme Holder / person authorized to sign for the Color Scheme Holder for,

hereby give consent to the applicant named to use my color scheme.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Color Scheme Holder / person authorized to sign for Color Scheme Holder  02-02-09

[Signature]

[Date]
ISSUED BY
OFFICE OF THE TREASURER & TAX COLLECTOR
PUBLIC PASSENGER VEHICLE DRIVER

EXPIRES: DECEMBER 31, 2009

VARINDER SINGH
P44-044686  TOWN CAB CO.

The above named person is licensed as a Public Passenger Vehicle Driver in accordance with the Municipal Police Code, Article 1, Sections 2.26.1 and 2.27.1 and Article 16, Section 1089.


<table>
<thead>
<tr>
<th>Applicant's Name (First, Middle, Last)</th>
<th>EUGENE SAMSONOV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residence Address (Street Address, City, State, Zip)</td>
<td>SAN FRANCISCO, CA - 94122</td>
</tr>
<tr>
<td>Mailing Address (If different than residence address)</td>
<td>SAME AS ABOVE</td>
</tr>
<tr>
<td>Residence Phone Number</td>
<td></td>
</tr>
<tr>
<td>Alternate Phone Number</td>
<td>(415)</td>
</tr>
<tr>
<td>Hours Available at this Number</td>
<td>EVN.</td>
</tr>
<tr>
<td>Hours Available at this Number</td>
<td>ANY</td>
</tr>
<tr>
<td>Social Security Number</td>
<td>N/A</td>
</tr>
<tr>
<td>California Driver's License Number</td>
<td></td>
</tr>
<tr>
<td>Expiration Date</td>
<td></td>
</tr>
<tr>
<td>Date of Birth</td>
<td></td>
</tr>
<tr>
<td>Place of Birth</td>
<td>RUSSIA</td>
</tr>
<tr>
<td>Race (Optional)</td>
<td>M/F</td>
</tr>
<tr>
<td>Height</td>
<td>5'-6&quot;</td>
</tr>
<tr>
<td>Weight</td>
<td>180 lbs</td>
</tr>
<tr>
<td>Eye Color</td>
<td>GRAY</td>
</tr>
<tr>
<td>Hair Color</td>
<td>GRAY</td>
</tr>
<tr>
<td>Color Scheme / Business Name</td>
<td>TOWN TAXI</td>
</tr>
<tr>
<td>Color Scheme / Business Address (Street Address, City, State, Zip)</td>
<td>999 PENNSYLVANIA ST. SAN FRANCISCO CA - 94107</td>
</tr>
<tr>
<td>Are you a U.S. Citizen?</td>
<td>Yes</td>
</tr>
<tr>
<td>Are you a U.S. Citizen?</td>
<td>No</td>
</tr>
<tr>
<td>Alien Resident Card Number</td>
<td>N/A</td>
</tr>
<tr>
<td>Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)?</td>
<td>No</td>
</tr>
<tr>
<td>Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)?</td>
<td>Yes</td>
</tr>
<tr>
<td>What date was your permit (A-Card) first issued?</td>
<td>2000</td>
</tr>
<tr>
<td>Permit #:</td>
<td>54048</td>
</tr>
<tr>
<td>Has this permit ever been revoked?</td>
<td>No</td>
</tr>
<tr>
<td>Has this permit ever been revoked?</td>
<td>Yes, if yes, explain:</td>
</tr>
<tr>
<td>Per MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere?</td>
<td>No</td>
</tr>
<tr>
<td>Per MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere?</td>
<td>Yes, if yes, explain:</td>
</tr>
<tr>
<td>Were you previously a medallion holder?</td>
<td>No</td>
</tr>
<tr>
<td>Were you previously a medallion holder?</td>
<td>Yes, Medallion #</td>
</tr>
<tr>
<td>If you answered 'Yes' to the previous question, was the medallion permit ever revoked?</td>
<td>No</td>
</tr>
<tr>
<td>If you answered 'Yes' to the previous question, was the medallion permit ever revoked?</td>
<td>Yes, if yes, explain for what cause:</td>
</tr>
</tbody>
</table>

Please describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):

I am a resident of the city of San Francisco and I have been a cab driver in the city of San Francisco for 20 years. I have never had a complaint filed against me. I love my city and the people who live in this city. I hope that the mayor of the city of San Francisco will provide a good service for the residents and tourists of my beloved city.

RECEIVED

OFFICE USE ONLY

[Handwritten notes on the bottom of the page]
I have driven a taxicab in the City of San Francisco and I meet the current year's driving requirement pursuant to SFPD Municipal Police Code Section 1121(b).  ☑ Yes  ☐ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1980</td>
<td>Present</td>
<td>San Francisco CA-94122</td>
</tr>
</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco?  30 years months

How many years driving experience do you have in San Francisco?  30 years months

Are you physically qualified to drive a standard vehicle safely?  ☑ Yes  ☐ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>Present</td>
<td>Town Taxi</td>
<td>999 Pennsylvania Ave, San Francisco, CA-94107</td>
<td>Driver</td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime?  ☑ No  ☐ Yes, if yes, provide the information required below. (Attach additional pages if needed)

Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit.

<table>
<thead>
<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
</tr>
</tbody>
</table>

Is your eyesight impaired?  ☑ Yes  ☐ No

to not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired?  ☑ Yes  ☐ No

Do you have any physical impairments?  ☑ No  ☐ Yes, if yes describe the impairment:

Do you now, or have you ever been, addicted to the use of intoxicating liquor?  ☑ Yes  ☐ No

Any Narcotic Drug?  ☑ Yes  ☐ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service?  x Yes  □ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e. state existing radio cab company, detail information about new service, etc.)

Town Taxi Radio Dispatch / Gas & Rate Operation

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal?  x Yes  □ No

If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab?  x Yes  □ No

Read each section and sign initials to the left of each section if you agree and understand.

xS I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

xS I understand that there may be sections of the San Francisco municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sfgov.org. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

xS I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this 2/26/04 day of FEBRUARY 2009 at San Francisco, California.

Signature of Applicant

RECEIVED
FEB 8 2009
SAN FRANCISCO TAXI COMMISSION
EUGENE SAMSONOV

SAN FRANCISCO CA-94122

TOWN TAXI
999 PENNSYLVANIA AV. SAN FRANCISCO CA-94107
(415) 401-8900
UNKNOWN

Because I was with this company by.

February 4, 2009
Eugene Samsonov

Jacob Mayzel
Manager

SF Town Taxi

02/04/09
CALIFORNIA

DRIVER LICENSE

EUGENE LEONID SAMSONOV

SEX: M    HAIR: BLK
HT: 5-08    WT: 163
EYES: GRN

12/16/2006  235  98  FD/14

EXPIRES: DECEMBER 31, 2009

EUGENE SAMSONOV

P44-054048  TOWN TAXI

The above named person is licensed as a Public Passenger Vehicle Driver in accordance with the Municipal Police Code, Article 1, Sections 2.26.1 and 2.27.1 and Article 16, Section 1089.

FEB 04 2009
Applicant's Name (First, Middle, Last): MARCELOS J DA FONSECA

Type of Medallion Applying for: ☑ Regular  ☐ Ramp

Residence Address: 1200 MISSISSIPPI ST - SAN FRANCISCO - CA - 94107

Residence Phone Number: (415) 282-3737

Hours Available at this Number: 11:00 AM - 02:00 PM

Social Security Number: ☑ Yes  ☐ No

Race (Optional): ☑ M  ☐ F

Date of Birth: 02-27-49

Place of Birth: BRAZIL

Height: 6'4"  Weight: 200

Hair Color: BLACK  Eye Color: GREEN

Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)? ☑ Yes  ☐ No

What date was your permit (A-Card) first issued: 02-27-89  Permit #: P44 - 059224

Has this permit ever been revoked? ☑ No  ☐ Yes

Are you a U.S. Citizen? ☑ Yes  ☐ No

Are you previously a medallion holder? ☑ No  ☐ Yes, Medallion #: ____________

MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere? ☑ No  ☐ Yes

If you answered 'Yes' to the previous question, as the medallion permit ever revoked? ☑ No  ☐ Yes

Describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):

I have been with Yellow Cab for 20 years. In my 20 year career I have dealt with my passengers in a courteous and professional manner. My geographical knowledge of the city and surrounding areas and my excellent driving record have allowed me to provide good and safe service local and out of town cab users throughout all these years. I am very proud of never being involved in an accident at my fault which can be attested to by Yellow Cab's Management who has issued me Safe Driving Awards (Copies attached).

I am granted this medallion, the pride of ownership, the awareness of my new responsibilities, my experience and my commitment to this profession will allow me to provide even greater quality of service and the public will be even better served. This medallion is not granted it will be a loss to the public because my presence is of great value to cab users.
I have driven a taxicab in the City of San Francisco and I meet the current year’s driving requirement pursuant to SFPD Municipal Police Code Section 1121(b). ☑ Yes ☐ No

<table>
<thead>
<tr>
<th>List residence addresses for last five years (List most recent first, attach additional pages if needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>From Date</td>
</tr>
<tr>
<td>Oct 1999</td>
</tr>
<tr>
<td>(Continued)</td>
</tr>
</tbody>
</table>

| (9 YEARS ON SAME ADDRESS.) |

<table>
<thead>
<tr>
<th>How long have you lived within a 30 mile radius of San Francisco?</th>
<th>How many years driving experience do you have in San Francisco?</th>
<th>Are you physically qualified to drive a standard vehicle safely?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ 4 years 10 months</td>
<td>☑ 21 years 0 months</td>
<td>☑ Yes ☐ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>List employment for last five years (List most recent first, attach additional pages if needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>From Date</td>
</tr>
<tr>
<td>Feb 89</td>
</tr>
</tbody>
</table>

| (94107) |

| (Continued) |

| Have you ever been convicted of, plead guilty or No Contest to any crime? | ☑ No | ☐ Yes |

| Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit. |

<table>
<thead>
<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
</tr>
</thead>
</table>

| (Continued) |

| Is your eyesight impaired? | ☑ Yes | ☑ No |

| Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses. |

| Is your hearing impaired? | ☐ Yes | ☑ No |

| Do you have any physical impairments? | ☑ No | ☐ Yes, if yes describe the impairment: |

| Have you ever had: | ☑ No | ☐ Yes, if you have, describe the condition: |

| Epilepsy | ☑ No | ☐ Yes | ☑ No |

| Vertigo | ☑ No | ☐ Yes | ☑ No |

| Heart Trouble | ☑ No | ☐ Yes | ☑ No |

| Are you now, or have you ever been, addicted to the use of intoxicating liquor? | ☑ No | ☐ Yes |

| Any Narcotic Drug? | ☑ No | ☐ Yes | ☑ No |
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? Yes □ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e. state existing radio cab company, detail information about new service, etc.)
Through Yellow Cab Co.

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? Yes □ No
If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? Yes □ No

Read each section and sign initials to the left of each section if you agree and understand.

I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

I understand that there may be sections of the San Francisco municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sfgov.org. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

I will actively and personally engage as a permitee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this 5/11 day of February, 2009 at San Francisco, California.

[Signature of Applicant]
### COLOR SCHEME DESIGNATION APPLICATION

San Francisco Taxicab Commission

**Please Print Clearly - Complete Entire Form**

<table>
<thead>
<tr>
<th>Applicant's Name (First, Middle, Last)</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marcelos da Fonseca</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- San Francisco - CA - 94122</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address, if different from above (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

If this color scheme request is granted by the Taxicab Commission, list what the taxi company name, address and phone number will be:

<table>
<thead>
<tr>
<th>Name of Taxi Company</th>
<th>Business Address of Taxi Company (Street Address, City, State, Zip)</th>
<th>Owner / Operator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow Cab Coop</td>
<td>1500 Mississippi St - San Francisco - CA - 94122</td>
<td>Owner / Operator</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business Phone</th>
<th>Medalion Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>415 - 282-3737</td>
<td></td>
</tr>
</tbody>
</table>

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

I have been with Yellow Cab Coop for 20 years. They have the best and the safest equipment. I intend to stay with Yellow Cab for sure.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on **February 5th** 2009 at San Francisco, California.

- **Marcelos da Fonseca**  
  Print Name of Applicant

- **Marcelos da Fonseca**  
  Signature of Applicant

### INFORMATION TO BE COMPLETED BY ACCEPTING COLOR SCHEME Holder

<table>
<thead>
<tr>
<th>Name of person authorized to sign for Color Scheme Holder</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Richard Wiener</td>
<td>Operations Mgr.</td>
</tr>
</tbody>
</table>

I, the Color Scheme Holder / person authorized to sign for the Color Scheme Holder for **Yellow Cab Coop**

<table>
<thead>
<tr>
<th>Color Scheme Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow Cab Coop</td>
</tr>
</tbody>
</table>

I hereby give consent to the applicant named to use my color scheme.

certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

**Signature of Color Scheme Holder / person authorized to sign for Color Scheme Holder**

**FEB 05 2009**
CALIFORNIA
DRIVER LICENSE

MARCELOS D A FONSECA
SAN FRANCISCO CA 94122
SEX:M    HAIR:BLK    EYES:GRN
HT:6-02    WT:170    DOB

EXPIRED: DECEMBER 31, 2009
MARCELOS D A FONSECA
P44-059224    YELLOW CAB CO

The above named person is licensed as a Public Passenger Vehicle Driver in accordance with the Municipal Police Code, Article 1, Sections 2.26.1 and 2.27.1 and Article 16, Section 1089.
Applicant's Name (First, Middle, Last): 
ELIAR A. GASASH
Residence Address (Street Address, City, State, Zip): 
ROAD (AKRON), OH, 44605
Mailing Address (if different from residence address)

Residence Phone Number: (712) 111-1234
Alternate Phone Number: (712) 456-7890
Hours Available at this Number: SUNDAY
Hours Available at this Number: DAYTIME
Social Security Number: 123-45-6789
Other name(s) used: N/A

California Drivers License Number / Expiration Year: 123-45-6789 / 2013
Date of Birth: 1-1-1983
Place of Birth: ETHIOPIA
Race: BLACK
Sex: M
Height: 5'11"
Weight: 180 lbs
Eye Color: BROWN
Hair Color: BLACK
Color Scheme / Business Name: COMFORT CAB
Business Number: 444/ PENNSYLVANIA AVE.
Are you a U.S. Citizen? Yes
Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)? Yes
What date was your permit (A-Card) first issued: 1-1-1983
Permit #: A11536 056683
Has this permit ever been revoked? No

Per MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere? Yes
What was the medallion permit ever revoked? No

Please describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):

I DON'T THINK THE PUBLIC WILL BE PROPERLY SERVED IF THIS MEDALLION IS NOT GRANTED FOR THESE REASONS:
I HAVE DRIVEN TAXI IN AKRON IN JANUARY 1980 FOR ONE YEAR AND FROM 1980 ON AGAIN.
I MAINTAINED CLEAN driving RECORD AS A TAXI DRIVER AND NO CUSTOMER COMPLAINTS.
I KEPT CLEAN VEHICLE IN EXCELSIOR CONDITION AS A TAXI DRIVER.
I AM VERY KNOWLEDGABLE OF THE CITY INC.
I HAVE A RAMP MEDALLION NOW WITH NO ACCIDENTS.
I have driven a taxicab in the City of San Francisco and I meet the current year's driving requirement pursuant to SFPD Municipal Police Code Section 1121(5).  ☐ Yes  ☐ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
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<tbody>
<tr>
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</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco?  ☐ 21 years ☐ 24 months

How many years driving experience do you have in San Francisco?  ☐ 21 years ☐ 24 months

Are you physically qualified to drive a standard vehicle safely?  ☐ Yes  ☐ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/1/01</td>
<td>3/09</td>
<td>Owner Operator</td>
<td>79 Hawkins-Vanita Ave.</td>
<td>Taxicab Driver</td>
</tr>
<tr>
<td>7/06</td>
<td>10/08</td>
<td></td>
<td>555 Stockton St. SF CA</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime?  ☐ No  ☐ Yes, if yes, provide the information required below.

Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit.

<table>
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<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>NA</td>
</tr>
<tr>
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</tr>
</tbody>
</table>

Is your eyesight impaired?  ☐ Yes  ☐ No

Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired?  ☐ Yes  ☐ No

Do you have any physical impairments?  ☐ No  ☐ Yes, if yes describe the impairment:

Have you ever had:  ☐ Yes  ☐ No

- Epilepsy
- Vertigo
- Heart Trouble

Are you now, or have you ever been, addicted to the use of intoxicating liquor?  ☐ Yes  ☐ No

Any Narcotic Drug?  ☐ Yes  ☐ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? □ Yes □ No

If yes, explain how you will use and provide 24-hour radio dispatch service. (i.e. state existing radio cab company, detail information about new service, etc.)

COMFORT CAR CHECKER DISPATCH SERVICE

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? □ Yes □ No

If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? □ Yes □ No

Read each section and sign initials to the left of each section if you agree and understand.

E.N. I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

E.N. I understand that there may be sections of the San Francisco municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library. Legal bookstores and on-line at www.sfacc.org. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

E.N. I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this Monday day of January 26th, 2009 at San Francisco, California.

Signature of Applicant

RECEIVED

FEB 9 2009
SAN FRANCISCO TAXI COMMISSION
COLOR SCHEME DESIGNATION APPLICATION
San Francisco Taxicab Commission

YOU MUST SUBMIT A CERTIFICATE OF WORKER'S COMPENSATION, REGISTRATION CARD, & INSURANCE CARD WITH THIS APPLICATION.

PLEASE PRINT CLEARLY – COMPLETE ENTIRE FORM

Applicant's Name (First, Middle, Last)  ELIAS A. NEGASH

Residence Address (Street Address, City, State, Zip)  7420 OAKLAND, CA 94605

If this color scheme request is granted by the Taxicab Commission, list what the taxi company name, address and phone number will be:

Name of Taxi Company  COMFORT CAB

Business Address of Taxi Company (Street Address, City, State, Zip)  911 PENNSYLVANIA AVE SF 94107

Business Phone  (415) 641-1611

Medallion Number  9669

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

I AM ONE OF THE FOUNDER OF THE COLOR SCHEME AND CURRENTLY A SHAREHOLDER.

... (Signature)

Executive on January 15, 2009 2009 at San Francisco, California.

ELIAS NEGASH

Name of Applicant

I, the Color Scheme Holder / person authorized to sign for the Color Scheme Holder, hereby give consent to the applicant named to use my color scheme.

... (Signature) 02/05/09

Nature of Color Scheme Holder / person authorized to sign for Color Scheme Holder

Date

This application is to be completed by accepting color scheme only upon receipt.

... (Signature) 02/05/09

Title: MANAGER

Check below:

Owner / Operator  Gas & Gate  Long Term Lease

Color Scheme Name  COMFORT CAB

Color Scheme Holder / person authorized to sign for the Color Scheme Holder for

DA Notice Date  Hearing Date  Decision of Taxicab Commission  New Declaration Signed

or Comp Submitted  Insurance Submitted  Paint Chips Submitted  Photos Submitted

Vend by  Receipt No  Amount  Date
PC&N TAXICAB/RAMP TAXI PERMIT APPLICATION
San Francisco Taxicab Commission

Applicant's Name (First, Middle, Last): Raed A Sweis
Type of Medallion Applying for: [ ] Regular [ ] Ramp

Residence Address (Street Address, City, State, Zip): Rancho Cucamonga CA 91730
Mailing Address (If different than above): —

Residence Phone Number: — Alternate Phone Number: —
Hours Available at this Number: — Hours Available at this Number: —

Social Security Number: — Other name(s) used: —

California Driver's License Number / Expiration Year: — Date of Birth: — Place of Birth: —
Rac (Optional): — Height: 5' 8" Weight: 180 Eye Color: — Hair Color: —
Color Scheme / Business Name: Desert Cab
Color Scheme / Business Address (Street Address, City, State, Zip): 555 Selby St SF CA 94112

Are you a U.S. Citizen? [ ] Yes [ ] No [ ] Alien Resident Card Number: 433555846

Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)? [ ] No [ ] Yes
What date was your permit (A-Card) first issued: — Permit #: 0717-096658
Has this permit ever been revoked? [ ] No [ ] Yes, if yes, explain: —

Per MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere? [ ] No [ ] Yes, if yes, explain: —

Were you previously a medallion holder? [ ] No [ ] Yes, Medallion # 2007. If you answered ‘Yes’ to the previous question, was the medallion permit ever revoked? [ ] No [ ] Yes, if yes, explain for what cause: —

Please describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):

NATURE AND ABILITY OF RADIO CALLS: I take a lot of radio calls. I believe it is extremely important to serve the public.

because —
The public will be properly served because the excellent service I have been providing in the last 16 years of experience. I have been driving for 16 years. I think the public will be very disappointed because I have been driving a taxi for 16 years and I have been doing a good job as by taking a lot of radio calls.
I have driven a taxicab in the City of San Francisco and I meet the current year's driving requirement pursuant to SFPD Municipal Police Code Section 1121(b). ☐ Yes ☐ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 31st, 2009</td>
<td>Dec 31st, 2009</td>
<td>San Francisco, CA 94117-0000</td>
</tr>
<tr>
<td>Jan 31st, 2007</td>
<td>Jan 1st, 2008</td>
<td>4894 Quinto Cordova, CA 94137-0000</td>
</tr>
</tbody>
</table>

How long have you lived within a 36 mile radius of San Francisco? 15 years __________ months

How many years driving experience do you have in San Francisco? 16 years __________ months

Are you physically qualified to drive a standard vehicle? ☐ Yes ☐ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oct 06</td>
<td>Dec 07</td>
<td>Desert Cab</td>
<td>677 Selly St, SF, CA 94114</td>
<td>Driver</td>
</tr>
<tr>
<td>Jul 06</td>
<td>Sep 06</td>
<td>Black/White Checker</td>
<td>999 Pershing San Francisco</td>
<td>Driver</td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime? ☐ No ☐ Yes, if yes, provide the information required below. (Attach additional pages if needed)

Failure to provide full information relative to prior convictions, guilty pleas or not contest pleas may be considered cause to deny the permit.

<table>
<thead>
<tr>
<th>Offense</th>
<th>Date</th>
<th>Place of Arrest</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Is your eyesight impaired? ☐ Yes ☐ No

Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired? ☐ Yes ☐ No

Do you have any physical impairments? ☐ No ☐ Yes, if yes describe the impairment:

Have you ever had: Epilepsy ☐ Yes ☐ No

Vertigo ☐ Yes ☐ No

Heart Trouble ☐ Yes ☐ No

Are you now, or have you ever been, addicted to the use of intoxicating liquor? ☐ Yes ☐ No

Any Narcotic Drug? ☐ Yes ☐ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? Yes ☑ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e. state existing radio taxicab company, detail information about new service, etc.)

I understand that I must apply for the entire permit from the Public Safety
I get the required Radio dispatch service.

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? Yes ☑ No

If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? Yes ☑ No

Read each section and sign initials to the left of each section if you agree and understand.

☑ I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

☑ I understand that there may be sections of the San Francisco Municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and online at www.sf.gov. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

☑ I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on the 7th day of Feb, 2009 at San Francisco, California.

Signature of Applicant

RECEIVED

FEB 9 2009

SAN FRANCISCO
TAX COMMISSION
Name of Taxi Company: Desoto Cab
Business Address of Taxi Company: 655 Seward St, San Francisco, CA 94124
Business Phone: (415) 970-140

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

I HAVE BEEN AT DESOTO FOR 4 YEARS. RADIO BUSINESS IS GOOD. AND I LOVE TO PLAY THE RADIO AND THE COMPANY IS SO FOR THE BEST.

Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on Feb 3, 2009 at San Francisco, California.

[Signature]

Cindy L. Ward
Title: GEN. MGR.

[Signature]

Cindy L. Ward
Title: DESOTO CAB CO.
Color Scheme Name: [Color Scheme Name]

Riley (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

[Signature]

Cindy L. Ward
Date: February 3, 2009
EXPIRES: DECEMBER 31, 2009

RAED A. SWEIS
P44-056658  DESOTO CAB

The above named person is licensed as a Public Passenger Vehicle Driver in accordance with the Municipal Police Code, Article 1, Sections 2.26.1 and 2.27.1 and Article 16, Section 1089.
Applicant's Name (First, Middle, Last)  
Ghanem Mahmoud Elmarshni

Residence Address (Street Address, City, State, Zip)  
Fremont, CA 94539

Mailing Address (If different than residence address)  
Same

Residence Phone Number:  
24 hrs.

Alternate Phone Number:  
24 hrs.

Hours Available at this Number:  
24 hrs.

Social Security Number:  
NONE

Date of Birth:  
Jordan

Sex:  
M

Height:  
6'0

Weight:  
185

Eye Color:  
BRN

Hair Color:  
Gr

Other name(s) used:  
NATIVE

Extraneous Number / Expiration Year:  
N/A

Date of Birth:  
NOV 1992

Permit #:  
P44-0441928

Alien Resident Card Number:  
92-679-NH 74

Are you a U.S. Citizen?  
[M] Yes  [ ] No

Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)?  
[ ] No  [X] Yes

What date was your permit (A-Card) first issued?  
NOV 1992

Was this permit ever revoked?  
[ ] No  [X] Yes, if yes, explain:

Did MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere?  
[ ] No  [X] Yes, if yes, explain:

Are you previously a medallion holder?  
[ ] No  [X] Yes, Medallion #  

If you answered 'Yes' to the previous question, was the medallion permit ever revoked?  
[ ] No  [X] Yes, if yes, explain for what cause:

Please describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):

This medallion is not granted the public will not be limited in the amount of available transportation being an experienced taxi driver, not having a medallion will limit the amount of taxi service to S.F. neighborhoods because I am a "city driver" limited taxi service also causes long wait times for visitors to the city of San Francisco as well as the locals.

I will operate an Alternative Fuel Car

OFFICE USE ONLY

[Signature]

Date:  
[Signature]  
07/4514  1/26 7  14
I have driven a taxicab in the City of San Francisco and I meet the current year's driving requirement pursuant to SFPD Municipal Police Code Section 1121(b). ☒ Yes ☐ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1975</td>
<td>Now</td>
<td>Fremont, Cal. 94539</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Same address for 34 years</td>
</tr>
</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco? 34 years __ months

How many years driving experience do you have in San Francisco? 26 years __ months

Are you physically qualified to drive a standard vehicle safely? ☒ Yes ☐ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>Now</td>
<td>Regent Cab Co.</td>
<td>98 Pennsylvania Ave, San Francisco, Cal. 94127</td>
<td>Driver</td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime? ☐ No ☒ Yes, if yes, provide the information required below. (Attach additional pages if needed)

Failure to provide full information relative to prior convictions, guilty pleas or no contest pleas may be considered cause to deny the permit.

Offense: __________________________ Date: __________________________ Place of Arrest: San Francisco

Disposition: __________________________

Is your eyesight impaired? ☒ Yes ☐ No

Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Is your hearing impaired? ☒ Yes ☐ No

Do you have any physical impairments? ☐ No ☒ Yes, if yes describe the impairment: __________________________

Have you ever had:  
- Epilepsy ☐ Yes ☒ No  
- Vertigo ☐ Yes ☒ No  
- Heart Trouble ☐ Yes ☒ No

Have you now, or have you ever been,  
- Addicted to the use of intoxicating liquor? ☐ Yes ☒ No  
- Any Narcotic Drug? ☐ Yes ☒ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? ☑ Yes ☐ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e., state existing radio cab company, detail information about new service, etc.)

Yes, I will provide an existing radio cab company.

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? ☑ Yes ☐ No

If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate, and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? ☑ Yes ☐ No

Read each section and sign initials to the left of each section if you agree and understand.

I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco, Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

I understand that there may be sections of the San Francisco Municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sf.gov. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this 7th day of Feb., 2009 at San Francisco, California.

[Signature of Applicant]
PLEASE PRINT CLEARLY – COMPLETE ENTIRE FORM

Applicant's Name (First, Middle, Last)  
Gharem Mahmoud Elmashni

Residence Address (Street Address, City, State, Zip)  
Ct. Fremont Ca. 94539

Mailing Address, if different from above (Street Address, City, State, Zip)  
Same

If this color scheme request is granted by the Taxicab Commission, list what the taxi company name, address and phone number will be:

Name of Taxi Company  
Regents Cab Co.

Business Address of Taxi Company (Street Address, City, State, Zip)  
2189 Pennsylvania Av., San Francisco, CA 94107

Business Phone  
(415) 487-1004

Medallion Number

☐ Owner / Operator
☐ Gas & G ate
☐ Long Term Lease

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

Because I have been working with Regents Cab Company for almost 10 years.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 2009

Gharem Elmashni
Print Name of Applicant

Signature of Applicant

Name of person authorized to sign for Color Scheme Holder:

Steven Anton

Title: General Manager

Regents Cab Co.

Color Scheme Name

I, the Color Scheme Holder / person authorized to sign for the Color Scheme Holder for

hereby give consent to the applicant named to use my color scheme.

certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Color Scheme Holder / person authorized to sign for Color Scheme Holder

Date

Incl. Notice Date

Hearing Date

Declaration of Taxicab Commission

New Declaration Signed

Driver's Comp Submitted

Insurance Submitted

Paint Chips Submitted

Photos Submitted
ISSUED BY
OFFICE OF THE TREASURER & TAX COLLECTOR
PUBLIC PASSENGER VEHICLE DRIVER

EXPIRES: DECEMBER 31, 2009

GHANEM M. EL MASHNI
P44-044898 REGENTS CAB CO.

The above named person is licensed as a Public Passenger Vehicle Driver in accordance with the Municipal Police Code, Article 1, Sections 2.26.1 and 2.27.1 and Article 16, Section 1089.

CALIFORNIA DRIVER LICENSE

CLASS: C

EXPIRE: 09/13/2009

SEX: M  HAIR: GRY  EYES: BRN
HT: 5-09  WT: 185  DOB:

RSTR: CORR LEN

09/11/2007 844 21 FD/12
**PC&N TAXICAB/RAMP TAXI PERMIT APPLICATION**
San Francisco Taxicab Commission

<table>
<thead>
<tr>
<th>Applicant's Name (First, Middle, Last)</th>
<th>Type of Medallion Applying for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEONID DOLINSKY</td>
<td>□ Regular □ Ramp</td>
</tr>
</tbody>
</table>

**Residence Address (Street, City, State, Zip):**
San Bruno, CA 94066

**Mailing Address (if different than residence address):**

<table>
<thead>
<tr>
<th>Residence Phone Number</th>
<th>Alternate Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Hours Available at this Number</th>
<th>Hours Available at this Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>After 5:30 p.m.</td>
<td>After 5:30 p.m.</td>
</tr>
</tbody>
</table>

**Social Security Number:**

<table>
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<tr>
<th>Other name(s) used</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Commercial Driver License Number / Expiration Year</th>
<th>Date of Birth</th>
<th>Place of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ukraine</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>Gender</th>
<th>Height</th>
<th>Weight</th>
<th>Eye Color</th>
<th>Hair Color</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M/F</td>
<td></td>
<td></td>
<td>Brown</td>
<td>Brown</td>
</tr>
</tbody>
</table>

**Color Scheme / Business Name:**
United Cab Co

**Color Scheme / Business Address (Street Address, City, State, Zip):**
20 Heron St. S.F. CA 94103

**Are you a U.S. Citizen?**
- Yes □ No

**Are you currently an active driver and hold a current Public Passenger Vehicle Driver Permit (A-Card)?**
- Yes □ No

**What date was your permit (A-Card) first issued?**
03/1994

**Permit #:** P44-046105

**Has this permit ever been revoked?**
- Yes □ No

**Per MPC §1081(a)(3), do you hold or have you ever held any other permits issued to operate a motor vehicle for hire either in the City and County of San Francisco or elsewhere?**
- Yes □ No

**Were you previously a medallion holder?**
- Yes □ No

**If you answered ‘Yes’ to the previous question, was the medallion permit ever revoked?**
- Yes □ No

**Please describe why the public will not be properly served if this medallion is not granted (attach additional pages if necessary):**

I have been driving taxi cab in the city of San Francisco for the last fifteen years, and I love my job. I enjoy driving people of our beautiful city and its guests. I'm a very good radio player and I know the city very well. And when I am granted my permit I will work even harder and provide great service to all my passengers. I'm working the early hours in the city to get going all the time to support the city and the public. I help old people get into the cab, the tourists would like to know the best places in our city.
I have driven a taxi cab in the City of San Francisco and I meet the current year's driving requirements pursuant to SFPD Municipal Police Code Section 1121(b). ☒ Yes ☐ No

List residence addresses for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Residence Address (Street Address, City, State, Zip)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/02</td>
<td>present</td>
<td>Ln. San Bruno, CA 94066</td>
</tr>
</tbody>
</table>

How long have you lived within a 30 mile radius of San Francisco? ☒ 16 years ☐ 2 months

How many years driving experience do you have in San Francisco? ☒ 16 years ☐ 0 months

Are you physically qualified to drive a standard vehicle safely? ☐ Yes ☒ No

List employment for last five years (List most recent first, attach additional pages if needed)

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>Company Name</th>
<th>Address (Street Address, City, State, Zip)</th>
<th>Type of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/94</td>
<td>present</td>
<td>United Cab Co</td>
<td>20 Heron S.F., CA 94003</td>
<td>Cab Driver</td>
</tr>
<tr>
<td>04/82</td>
<td>present</td>
<td>Preppers on the Pier</td>
<td>Pier 39 #161, S.F., CA 94133</td>
<td>Sales</td>
</tr>
</tbody>
</table>

Have you ever been convicted of, or plead guilty or No Contest to any crime? ☒ Yes ☐ No

Failure to provide full information relative to prior convictions, guilty pleas, or not contest pleas may be considered cause to deny the permit.

Offense: ☐

Date: 02-02-96

Place of Arrest: San Mateo

Disposition: ☐

Is your eyesight impaired? ☐ Yes ☒ No

Do not include ordinary nearsightedness or farsightedness corrected by eyeglasses.

Do you have any physical impairments? ☐ No ☒ Yes, if yes describe the impairment:

Have you ever had: ☐ Yes ☒ No

Epilepsy ☐ Yes ☒ No

Vertigo ☐ Yes ☒ No

Heart Trouble ☐ Yes ☒ No

Are you now, or have you ever been, addicted to the use of intoxicating liquor? ☐ Yes ☒ No

Any Narcotic Drug? ☐ Yes ☒ No
If you are granted a taxicab permit, will you use or provide 24-hour radio dispatch service? ☑ Yes ☐ No
If yes, explain how you will use and provide 24-hour radio dispatch service: (i.e. state existing radio cab company, detail information about new service, etc.)

National Cab Co. radio dispatch

If you are granted a taxicab permit, will you use an accurate taximeter at all times and possess a valid current Weights and Measures seal? ☑ Yes ☐ No
If you are granted a taxicab permit, will you obtain a San Francisco Airport decal, submit annually a State of California brake, road lamp, and smog inspection certificate and submit to an annual inspection of the general appearance of the interior and exterior of your taxicab? ☑ Yes ☐ No

Read each section and sign initials to the left of each section if you agree and understand.

L.D. I understand that in addition to the regulations adopted by the Taxicab Commission and of the City and County of San Francisco Controller there are sections of the San Francisco Municipal Code, San Francisco Traffic Code and California Vehicle Code that are applicable to my business as a taxicab permit holder.

L.D. I understand that there may be sections of the San Francisco Municipal Code that are applicable to my business and/or permit. There are copies of the San Francisco Municipal Code available at City Hall, The Public Library, Legal bookstores and on-line at www.sfgov.org. If a Letter of Intent is required, I acknowledge that the Letter of Intent is part of the application, and I declare under penalty of perjury that the foregoing is true and correct. Executed at San Francisco, California. I understand that any false or incomplete information provided by me, relative to this application, may be considered cause to either deny the requested permit or revoke the permit that is granted.

L.D. I will actively and personally engage as a permittee-driver under any permit issued to me for at least four (4) hours during any twenty-four (24) hour period at least seventy-five percent (75%) of the business days during the calendar year and that the information submitted on my application and financial statement is true and correct. I understand that any false or incomplete information provided by me relative to this application, may be considered cause to either deny the requested permit or revoke the permit if granted.

I have read and completed all of the above statements and declare under penalty of perjury that they are true and correct to the best of my knowledge.

Executed on this 31st day of January, 2009 at San Francisco, California.

[Signature of Applicant]
COLOR SCHEME DESIGNATION APPLICATION
San Francisco Taxicab Commission

*YOU MUST SUBMIT A CERTIFICATE OF WORKER’S COMPENSATION, REGISTRATION CARD, & INSURANCE CARD WITH THIS APPLICATION.*

PLEASE PRINT CLEARLY – COMPLETE ENTIRE FORM

Applicant’s Name (First, Middle, Last)  |  Phone
Leonio Dolinsky

Residence Address (Street Address, City, State, Zip)  |  Mailing Address, if different from above (Street Address, City, State, Zip)
San Bruno, CA 94066

If this color scheme request is granted by the Taxicab Commission, list what the taxi company name, address and phone number will be:

Name of Taxi Company  |  Business Address of Taxi Company (Street Address, City, State, Zip)
United Cab Co  |  20 Heron St, San Francisco, CA 94103

Business Phone  |  Medallion Number  |  □ Owner/Operator  |  □ Gas & Gate  |  □ Long Term Lease
(415) 652-8862

Please describe why you would like to use the color scheme for the above named taxi company (attach additional pages if necessary):

I work for United Cab Co from 04/94 till present time. I like this location and radio dispatch and would like to continue working with the same company.

Certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 31 of January 2009 at San Francisco, California.

Dolinsky

Name of Applicant

Signature of Applicant

Title: General Manager

Name of person authorized to sign for Color Scheme Holder:

TEO TEHRANI

Color Scheme Holder/person authorized to sign for the Color Scheme Holder for:

Color Scheme Name

If I or (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date 2/2/09

Date

Signature of Color Scheme Holder/person authorized to sign for Color Scheme Holder

A Notice Date Hearing Date Decision of Taxicab Commission New Declaration Signed

A Comp Submitted Insurance Submitted Paint Chips Submitted Photos Submitted
Consent: Item C

Consideration of the Taxi Commission to grant a Color Scheme Change to:

<table>
<thead>
<tr>
<th>Medallion Holder Name:</th>
<th>Medallion #:</th>
<th>Change:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Eric Grattan Schaefer</td>
<td>395</td>
<td>Delta to Luxor</td>
</tr>
</tbody>
</table>
TAXICAB COLOR SCHEME CHANGE APPLICATION
San Francisco Taxicab Commission

CHANGE OF COLOR SCHEME – From: DELTA To: LUXOR

*Forms to submit with this application: Certificate Of Worker's Compensation, Registration Card, Insurance Card, Vehicle Introduction Form (2) and Color Scheme Change Questionnaire.

PLEASE PRINT CLEARLY – COMPLETE ENTIRE FORM

Applicant's Name (First, Middle, Last) Eric Gratton Schaefer
Residence Address (Street Address, City, State, Zip) Tucson, AZ 85712

Joint Applicant's Name (First, Middle, Last) Phone
Residence Address (Street Address, City, State, Zip) Phone

Is this a Corporate permit? ☐ No ☐ Yes if yes, Name of Corporation:

If this color scheme request is granted by the Taxicab Commission, list what your business name, address and phone number will be.

Business Name LUXOR CAB COMPANY Business Address (Street Address, City, State, Zip) 2230 JERSEY ST. SAN FRANCISCO, CA 94124
Business Phone (415) 282-1224
Mailbox Number(s) 395
☐ Owner / Operator ☐ Gas & Gate ☐ Long Term Lease

Please describe why you would like to change to the above named taxi company (attach additional pages if necessary):

David Van, sole proprietor of Delta Cab & Its Color Scheme has passed away & that company will be wound up.

I (We) certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

 Executed this 29th day of JANUARY, 2009 at San Francisco, California

Eric G. Schaefer
Print Name of Applicant

Signature of Applicant

***************TO BE COMPLETED BY ACCEPTING COLOR SCHEME ONLY***************

Name of person authorized to sign for Color Scheme Holder: Martin C. Smith
Title: Color Scheme Manager

I, the Color Scheme Holder / person authorized to sign for the Color Scheme Holder for LUXOR CAB COMPANY (Taxicab Color Scheme)

hereby give consent to the applicant named to use my color scheme.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signed: Martin C. Smith
Signature of Color Scheme Holder / person authorized to sign for Color Scheme Holder

Date 1-29-09

***************OFFICE USE ONLY***************

Agenda Notice Date 1-29-09
Hearing Date 2-24-09
Decision of Taxicab Commission
New Declaration Signed

Worker's Comp Submitted ☐ Insurance Submitted ☐ Paint Chips Submitted ☐ Photos Submitted ☐

Received by 1-29-09
Receipt No. 024481
Amount 416.00
Date

Updated: July 23, 2008, G:Forms & TemplatesApplications & Driver Info sheets/ColorSchemeApplication.doc
Luxor Cabs, Inc.
2230 Jerrold Avenue, San Francisco CA 94124, Tel. (415) 282 1224 Fax (415) 282 1706

SF Taxicab Commission
25 Van Ness Avenue #420
San Francisco, CA 94102

January 30, 2009

Re: Medallion 395

This is to verify that Luxor Cab is happy to welcome Eric Schaefer as a medallion holder with our color scheme.

Liability and workers' compensation insurance policies are in place, as documented with the attached certificates.

Luxor will advise the commission of the vehicle particulars when Mr. Schaefer's color scheme change is approved.

Sincerely,

[Signature]

Martin Smith
Operations Department
ACORD® CERTIFICATE OF LIABILITY INSURANCE

PRODUCER

Jnion Banc Insurance Svcs, Inc.
50 B Street, Suite 2400
San Diego, CA 92101
100-421-6744

INSURED

Luxor Cab Company
2230 Jerrold Avenue
San Francisco, CA 94124

INSURERS AFFORDING COVERAGE

<table>
<thead>
<tr>
<th>INSURER</th>
<th>NAIC #</th>
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COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH REGARD TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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Policy Effective Date: 05/01/08
Policy Expiration Date: 05/01/09

MC Statutory Limits: 1,000,000
E.L. EACH ACCIDENT: $1,000,000
E.L. DISEASE - EACH EMPLOYEE: $1,000,000
E.L. DISEASE - POLICY LIMIT: $1,000,000

CANCELLATION

Ten Day Notice for Non-Payment of Premium

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDAYER TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Port of Oakland/Oakland International Airport
Attn: Risk Transfer Office One
Airport Drive Box 45
Oakland, CA 94621

DARAM © ACORD CORPORATION 1998
ACORD® CERTIFICATE OF LIABILITY INSURANCE

PRODUCER
BB&T-John Burnham Ins Services
750 B Street Suite 2400
San Diego, CA 92101
819 231-1010

INSURED
Luxor Cabs Inc.
2230 Jerrold Avenue
San Francisco, CA 94124

INSURERS AFFORDING COVERAGE

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<th>NAIC #</th>
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<td>23620</td>
<td>Burlington Insurance Company</td>
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COVERAGE

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD (INDICATED). NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Certificate holder is named as additional insured as their interest may appear.

CERTIFICATE HOLDER

County of San Francisco
Central Admin/Purchasing Div.
1DR Carlton B.
Goodlett Place
San Francisco, CA 94102

CANCELLATION Ten Day Notice for Non-Payment of Premium

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

[Signature]

© ACORD CORPORATION 1980
# ACORD CERTIFICATE OF LIABILITY INSURANCE

**Insured:**
Luxor Cab Company  
2230 Jerrold Avenue  
San Francisco, CA 94124

**Certificate Holder:**

**Issuing Company:**
BB&T - John Burnham Insurance Services  
700 E Street, Suite 2400  
San Diego, CA 92101  
800 421-6744

**Insurers Affording Coverage:**
- Mercury Casualty Co.  
- Ins Group

**Date of Certificate:** 02/02/09

**Coverage:**

- **General Liability**
  - Commercial General Liability
  - Aggregate Limit Applied Per Occurrence

**Policy Limits:**
- Property Damage Limit: $1,000,000
- Bodily Injury Limit: $1,000,000 per person

**Exclusions:**
- Worker's Compensation and Employers' Liability

**Additional Information:**
- *Notable exclusions or special provisions could be found within the document*

**Cancellation Notice:**
- If this certificate is cancelled, the insurer will send a notice by mail 30 days prior to the effective date of cancellation.

**Authorized Representative:**
LILAY

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**Policy Details:**

<table>
<thead>
<tr>
<th>Type of Insurance</th>
<th>Policy Number</th>
<th>Policy Effective Date</th>
<th>Policy Expiration Date</th>
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**Endorsements/Provisions:**

- All required endorsements and special provisions are detailed below.

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**Disclaimer:**
This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.