

WORTHINGTON CITY COUNCIL

ADDENDUM

**7:00 P.M., Monday, September 12, 2022
City Hall Council Chambers**

CASE ITEM

E. CITY COUNCIL BUSINESS - ADMINISTRATION (WHITE)

8. APPLICATION FOR TAXI OPERATOR LICENSE

Worthington has been without a private taxi service since the end of 2021. Southwest Minnesota Opportunity Council (SMOC) has provided on-demand fare-based service for the past nine months in the absence of a private entity. SMOC's on-demand service operates limited hours of 7:30 a.m. to 4:30 p.m. Monday through Friday. The Nobles County Joint Powers Transit Authority has authorized that non-exclusive taxi service operators may apply for a license to provide fare-based rides in Worthington upon approval by the Worthington City Council in accordance with City Ordinance Chapter 118.

Enclosed as Exhibit 8 is an application from Ayano Badassa of USA Transportation Service, LLC of Worthington to operate a taxi service in Worthington and the surrounding area. Hours of operation are Monday – Sunday, 24-hour service.

Mr. Badassa's application has been reviewed and approved by the Transit Authority.

Council action is requested to consider the application and approval.



Application for Taxi Operator License

City of Worthington, MN

License Term: For Calendar Year _____ (January 1 – December 31).

Applicant/Owner Information		
First Name <u>AYANO</u>	Full Middle Name <u>ULI</u>	Last Name <u>BADASSA</u>
Address <u>2230 Castlewood Dr</u>		
City, State, Zip <u>Worthington, MN 56187</u>		
Telephone Number <u>507-491-4875</u>	Cell Phone Number <u>Same</u>	
Date of Birth <u>01-01-1986</u>	Driver's License Number <u>W563-235-544-314</u>	
Email Address <u>Ayano.badassa@icloud.com</u>		

Taxi Service Information	
Taxi Business Name <u>USA Transportation Service LLC</u>	
Taxi Business Address <u>2230 Castlewood Dr</u>	
City, State, Zip <u>Worthington, MN 56187</u>	
Telephone Number <u>507-370-7100</u>	Cell Phone Number
MN Tax ID # <u>8335154</u>	Federal Tax ID # <u>88-4072540</u>
Email Address <u>USATransportationservice20@gmail.com</u>	

Taxi Vehicle Information				
Vehicle Make / Model	Vehicle Year	MN License Plate Number	Title to Vehicle (if other than applicant)	Seating Capacity
<u>HONDA CR-V</u>	<u>2015</u>	<u>HVV 623</u>	<u>19805330-1</u>	<u>5</u>

Certificate of Compliance

Minnesota Workers' Compensation Law

This form must be completed by the business license applicant.

Print in ink or type

Minnesota Statutes § 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minn. Stat. chapter 176. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

A valid workers' compensation policy must be kept in effect at all times by employers as required by law.

License or certificate number (if applicable) <u>W563-235-544-314</u>	Business telephone number <u>507-370-7100</u>	Alternate telephone number
Business name (Provide the legal name of the business entity. If the business is a sole proprietor or partnership, provide the owner's name(s), for example John Doe, or John Doe and Jane Doe.) <u>USA Transportation Service LLC</u>		
DBA ("doing business as" or "also known as" an assumed name), if applicable <u>2230 Castlewood DR</u>		
Business address (must be physical street address, no P.O. boxes) <u>2230 Castlewood DR</u>	City <u>Worthington</u>	State <u>MN</u>
County <u>Nobles</u>	Email address <u>USATransportationService20@gmail.com</u>	ZIP code <u>56187</u>

You must complete number 1 or 2 below.

Note: You must resubmit this form to the authority issuing your license if any of the information you have provided changes.

1. ☐ I have a workers' compensation insurance policy.

Insurance company name (not the insurance agent)

Policy number	Effective date	Expiration date
---------------	----------------	-----------------

☐ I am self-insured for workers' compensation. (Attach a copy of the authorization to self-insure from the Minnesota Department of Commerce; see www.mn.gov/commerce/industries/insurance/licensing/self-insurance.)

2. I am not required to have workers' compensation insurance because:

- ☐ I only use independent contractors and do not have employees. (See Minn. Stat. § 176.043 for trucking and messenger courier industries; Minn. Stat. § 181.723, subd. 4, for building construction; and Minnesota Rules chapter 5224 for other industries.)
- ☐ I do not use independent contractors and have no employees. (See Minn. Stat. § 176.011, subd. 9, for the definition of an employee.)
- ☐ I use independent contractors and I have employees who are not required to be covered by the workers' compensation law. (Explain below.)
- ☒ I only have employees who are not required to be covered by the workers' compensation law. (Explain below.) (See Minn. Stat. § 176.041 for a list of excluded employees.)

Explain why your employees are not required to be covered

Not yet

I certify the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify I am authorized to sign on behalf of the business.

Print name

Ayano Badassa

Applicant signature (required)

Ayano

Title

Date

9-1-2022

If you have questions about completing this form or to request this form in Braille, large print or audio, call (651) 284-5032 or 1-800-342-5354.

Checklist:		
<i>The following items need to be completed and attached in order for the application to be processed:</i>	YES	NO
1. A schedule of days and hours service will be provided is attached.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. A schedule of rates to be charged for the licensed year is attached. The schedule of rates will be posted in the taxi vehicles in full view of the passengers riding.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. The service area you will provide taxi service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. A document signed by a competent and experienced mechanic is attached. The document verifies each taxi vehicle in service is in good mechanical condition, safe for transportation, neat and clean. Ongoing biannual inspections are required, one of them will be a Commercial Vehicle Inspection by a certified mechanic. Vehicles are subjected to checks throughout the year	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Both sides of every taxi vehicle will be plainly and permanently marked showing the name of the taxi business / licensed operator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. A MN Driver's License is attached for each taxi driver and background checks are completed on each driver.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. The plan for ensuring Drug & Alcohol testing is performed throughout the year for the driver pool.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Certificates of Insurance Required:		
<i>Public liability and bodily injury insurance having coverages of at least \$100,000 per individual / \$300,000 per occurrence / \$100,000 for property damage is required. The insurance shall cover all passengers carried by the insured licensee as well as other persons injured or damaged by the negligent operation of the taxi vehicle. The policy shall contain a clause providing for 10 days written notice to the Worthington City Administrator prior to cancellation.</i>	YES	NO
1. A certificate of insurance is attached?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Workers' Compensation Insurance in accordance with MN Statute Chapter 176 Certificate of Compliance is attached?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<i>Please answer all questions truthfully to the best of your knowledge. Providing false information may be cause for denial of your license. If answering yes to either question, please attach addition information to this application.</i>		
	YES	NO
1. Have you previously operated a taxi / transportation service in another city or state under a license or permit which was denied, suspended, revoked or disciplined in any manner by federal, state, or local entities? If yes, please explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Have you had any driving citations in the last 5 years? If yes, please explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>

The Nobles County Joint Powers Transit Authority and/or the City of Worthington reserves the right to request additional information to assist in the evaluation of this application. Worthington City Council shall issue a taxi operator license within 30 days from and after the receipt of the complete application.

I do hereby swear the answers in this application are true and correct to the best of my knowledge. I do authorize the City of Worthington, its agents and employees, to obtain information and to conduct an investigation, if necessary, into the truth of the statements set forth in this application and my qualifications for a Taxi Operator License. Section 118.02: No taxicab may operate upon the streets of the city [of Worthington] without the approval of the [Worthington] City Council (Ord. 863 passed 10-11-1999)

Signature of Applicant: AYANO Badassa Date: 9-1-2022
 Print Name: AYANO MI Badassa
 First Middle Last

Form Updated 8/31/2022

USA Transportation Services LLC

2230 Castlewood Drive

Worthington MN 56187

(507)-491-4875

Days and Hours of Operation Taxi Service:

Monday – Sunday: 24-hour service

Service Area:

Worthington, Minnesota (Unlimited coverage in Minnesota)

Fares:

Base fare: \$5.00/person

Rate per mile: \$2.75

Waiting fee: \$15/hour

Insurance provider and coverage: TBD

Number of Drivers: 2

Number of Vehicles: 2

Background check: Applicant will obtain a criminal background check from BCA (Bureau of Criminal Apprehension) and the company will reimburse the Applicant.

Drug/ Alcohol: Screening Applicant will be sent to a third-party provider for drug/alcohol screenings.

Business Card Information:

Company Name: USA Transportation Services LLC

Address: 2230 Castlewood Drive, Worthington, MN 56187

Phone Number:

Email Address:

Hours of Operation: Monday – Sunday: 24-hour service

Rates:

- **Base fare: \$5.00/person**
- **Rate per mile: \$2.75/mile**
- **Waiting fee: \$15/hour**

CHAPTER 118: TAXICABS

Section

118.01 Definitions

118.02 Prohibition

§ 118.01 DEFINITIONS.

For the purpose of this chapter, the following definitions shall apply unless the context clearly indicates or requires a different meaning.

OPERATE. The soliciting or accepting for transportation of passengers for hire within the city.

STREET. Any street, alley, avenue, court, bridge, lane or public place within the city.

TAXICAB. Any vehicle engaged in the carrying of persons for hire, whether over a fixed route or not, and whether the same be operated from a street stand or subject to calls from a garage, or otherwise operated for hire; but the term shall not include vehicles subject to control and regulation by the Public Utilities Commission; vehicles regularly used by undertakers in carrying on their business; or vehicles operated by or under contract to the School District.

(Ord. 883, passed 10-11-99)

§ 118.02 PROHIBITION.

No taxicab may operate upon the streets of the city without the approval of the City Council.
(Ord. 883, passed 10-11-99) Penalty, see § 10.99