



CITY OF LOMPOC  
APPLICATION FOR CERTIFICATE OF  
PUBLIC CONVENIENCE AND NECESSITY  
(TAXICABS)

Investigation Fee \$100.00  
(Non-refundable)  
Paid: \_\_\_\_\_  
Receipt No. \_\_\_\_\_

1. NAME: Joanna Newell  
Applicant Name  
Jo's Taxi  
Business Name

2. ADDRESS:  
Residence: 434 North O St,  
Business: 434 North O St,

3. PHONE NUMBER:  
Residence: 805-588-5819 Business: 805-588-5819

*additional number applied per approval of city*

4. FINANCIAL STATUS OF APPLICATION: (Sufficient in detail to demonstrate the ability of applicant to operate and provide adequate and reliable taxicab service. If additional space is needed, continue on back.)

Per City approval Insurance would be provided through Maya Insurance East Ocean Ave, Pacific Gateway Insurance per approval of city council

5. EXPERIENCE OF APPLICANT IN OPERATION OF TAXICAB SERVICE:

previous experience as a independent Taxi driver through Promenade Taxi, knowledge of all aspects of taxi operations, ~~the~~ self advertising, marketing financial obligations, customer service, etc,

6. ADDITIONAL INFORMATION WHICH APPLICANT BELIEVES TENDS TO PROVE THE PUBLIC CONVENIENCE AND NECESSITY REQUIRE GRANTING OF CERTIFICATE: (In order to grant this application the City Council must find that taxicab service or additional taxicab service in the City is required by the public convenience and necessity, and that the applicant is fit, willing and able to provide such service and to conform to the provisions of Chapter 30 of the

7. DESCRIBE VEHICLES TO BE IN SERVICE AS TAXICABS IN THE CITY OF LOMPOC:

MAKE	YEAR	MODEL	VEHICLE I.D. NO.	LICENSE NO.
Dodge	2014	<del>Adventurer</del> Adventurer	1C3CD2AB9EN160351	7EJW957

I hereby declare under penalty of perjury that the foregoing is true and correct. Dated this 30 day of May, 2014, at Lompoc, California.

Joanna Newell  
Applicant Name (printed)

Joanna Newell  
Signature