

City of Fayetteville Item Review Form

2014-0078

Legistar File Number

03/04/2014

City Council Meeting Date - Agenda Item Only  
N/A for Non-Agenda Item

Greg Tabor

Submitted By

Police

Department

Action Required:

Request for public hearing to determine if a Certificate of Public Convenience and Necessity should be issued to Piggy Back, LLC for Taxi service.

Does this item have a cost?  No

Cost of this request

Category or Project Budget

Program or Project Name

Account Number

Funds Used to Date

Program or Project Category

\$0.00

Project Number

Remaining Balance

Fund Name

Budgeted Item?  No

Budget Adjustment Attached?  No

Previous Ordinance or Resolution # \_\_\_\_\_

Original Contract Number: \_\_\_\_\_

Comments:

*Blake Pennington*

*Paul A. Bell*

*Jim Mann*

*Frank J. ...*


ENTERED  
*dmw* 2/14/14

ENTERED  
*[Signature]*

V20130812



TO: Mayor Lioneld Jordan and Members of the City Council

FROM: Greg Tabor, Chief of Police 

DATE: February 13, 2014

RE: Request for Public Hearing on a Certificate of Public Convenience and Necessity for Taxi Service for Piggy Back LLC.

**Recommendation:**

The council should schedule a public hearing to determine if a Certificate of Public Convenience and Necessity should be issued to Piggy Back LLC for Taxi service.

**Background:**

City Ordinance 117 article IV governs taxicabs and requires a public hearing to determine if there exists the further need for taxicab service.

**Discussion:**

Attached are copies of Mr. Stocking's application for his certificate, quotes for proof of insurance, financial statement, and correspondence from the Arkansas Department of Finance and Administration DFA.

**Budget Impact:**

None.

**RESOLUTION NO. \_\_\_\_\_**

**A RESOLUTION TO GRANT A CERTIFICATE OF PUBLIC CONVENIENCE  
AND NECESSITY TO PIGGY BACK, LLC FOR THE OPERATION OF FOUR  
(4) TAXICABS IN THE CITY OF FAYETTEVILLE**

WHEREAS, the City Council of the City of Fayetteville, Arkansas finds that further taxicab and limousine service in the City is required by the public convenience and necessity; and

WHEREAS, the City Council of the City of Fayetteville, Arkansas, taking into consideration the number of taxicabs and limousines already in operation, whether existing transportation is adequate to meet the public need, the probable effect of increased service on local traffic conditions and the character, experience, and responsibility of the applicant, finds the applicant, Piggy Back, LLC is fit, willing, and able to perform such public transportation and to conform to the provisions of Article IV of Chapter 117 of the Fayetteville Code of Ordinances,

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE  
CITY OF FAYETTEVILLE, ARKANSAS:**

Section 1. That the City Council of the City of Fayetteville, Arkansas hereby grants a Certificate of Public Convenience and Necessity to Piggy Back, LLC for the operation of four (4) taxicabs in the City of Fayetteville, in accordance with Article IV of Chapter 117 of the Fayetteville Code of Ordinances.

**PASSED and APPROVED** this 4<sup>th</sup> day of March, 2014.

APPROVED:

ATTEST:

By: \_\_\_\_\_  
**LIONELD JORDAN, Mayor**

By: \_\_\_\_\_  
**SONDRA E. SMITH, City Clerk/Treasurer**



List any unpaid judgments against any of the owners, officers and stockholders and the nature or acts giving rise to said judgments:

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Describe the experience of all owners, officers and stockholders in the transportation of passengers:

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Give any facts you believe tend to prove the necessity of granting a certificate:

Fayetteville is in need of quick, inexpensive transportation near & around the UofA & Dickson St.

List the number of vehicles that will be under your operation or control:

4-10/15

Minimum and Maximum number of vehicles to be permitted:

4                      15  
Minimum                      Maximum

List the location of proposed depots and terminals:

Beaver Electric Building on Block St.

**Describe the color scheme or insignia to be used to designate your vehicle:**

White with Red, White, + Blue bumpers

**List your days and hours of operation:**

First Month - Wed Thurs, Fri, Sat 5:00pm - 12:00 a.m.  
Monday - Saturday 7am - 12am

**List any days you do not propose to provide taxicab service to the general public:**

Sundays except during special events.

**List your proposed passenger rate schedule:**

Free, Tip Only

Police Department Representative

[Signature]

Date

2/13/14

**NOTARY OATH**

STATE OF ARKANSAS

COUNTY OF WASHINGTON

On this the 13<sup>th</sup> day of February, 2014, before me, a Notary Public, personally appeared, Christopher Stocking and known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged that he executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

My commission expires:

June 3, 2023



*Patti T. Mulford*

**NOTARY**

1/21/2014

3876-A Rochester Circle  
Springdale, AR 72764

Dear Council Members:

My name is Cole Stocking. I'm in the process of pursuing my dream as a small business owner. The great thing about this area of the state and *country* is that it is filled with entrepreneurial minds just like mine. People who love local small business and have a passion for developing a city of creative ideas. My new adventure is called Piggy Back. It is an electric, quick trip, free taxi service created to meet the needs of local patrons, looking for a quick reliable form of transportation to restaurants, theatres, bars, work, or sporting events. My cars will have doors and heat to provide service during inclement weather. My vision for the company is too not only become the **Green** go-to choice of *short* transportation but to become a top player in generating revenues for local business owners. The main portion of revenues will come through advertising. I will run ads on scrolling tablets inside the vehicle, offering deals, specials, and Piggy Back membership cards for local businesses.

I'm currently an EMBA student at the University of Arkansas, pursuing my Masters in Business from the Walton College. I graduate in May 2014. I have no bad debt and low-risk credit. My company will have nearly \$60,000 in assets; 4 six-person electrical carts and computer hardware. The insurance quotes are attached. I didn't provide current active insurance. I'm not going to make the investment in the business before I have approval from the City of Fayetteville. I ask for your approval of this creative idea. My plan is to not only become one of Fayetteville's best young entrepreneurs and boost the revenues of other local companies, but to create innovation in the City of Fayetteville. I want people to know that this is where you can go to pursue your inventive business dreams.

Thank you for your consideration.

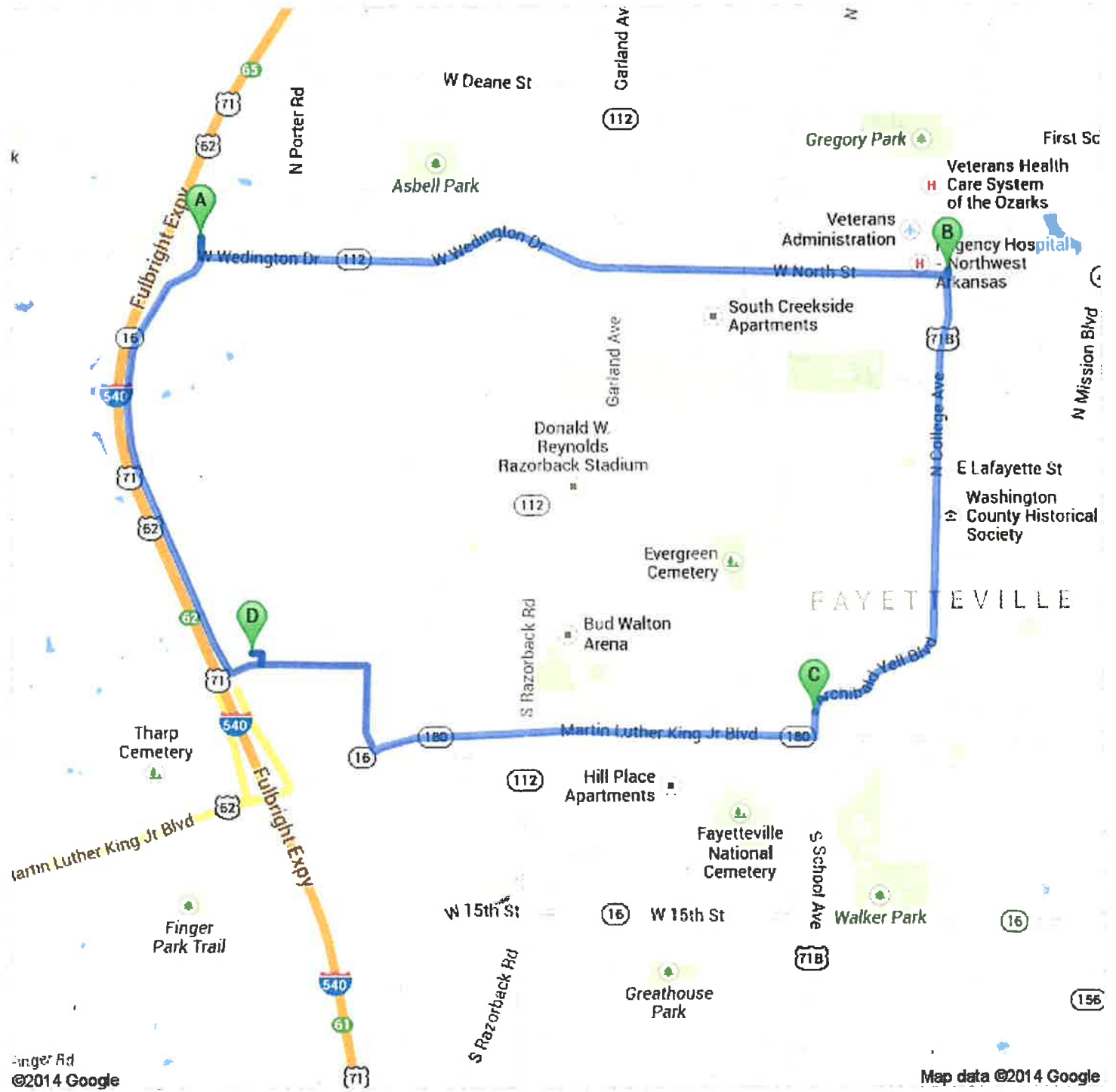
Sincerely,

Cole Stocking  
479-719-2192





### Directions to 1205 N Futrall Dr, Fayetteville, AR 72703 7.8 mi – about 19 mins



Account Summary For THE SCOOTER GUYS LLC

**BHHC**  
**Quick**

Quote #: 2118210  
 Status: New/Pending Info  
 Policy Type: AP

Originally Quoted: 1/01/1900 12:00 AM  
 Quote Printed: 9/27/2013 12:46 PM EDT  
 Proposed Effective: 10/01/2013 12:00 AM  
 Proposed Expiration: 10/01/2014 12:00 AM

Quoted By: Nick Gustafson  
 Berkshire Hathaway Homestate  
 3333 Farnam Street  
 Omaha, NE 68131

ngustafson@bhhc.com  
 Producer: BancorpSouth Insurance  
 8315 Cantrell Rd, Ste 300  
 Little Rock, AR 72227  
 Phone - (501) 664-7705  
 Fax - (501) 664-8052

DOT #: Unknown  
 MC #: Unknown

Symbol	Coverage	Limit (\$)	Premium (\$)
7	Liability	1,000,000 CSL	7,119
10	UM - BIPD	1,000,000 CSL	805
10	UIM - BI Only	1,000,000 CSL	805
7	Medical Payments	5,000	402
7	Physical Damage	See Specific Unit	2,175
	Total Ins Value	37,797	
<b>Total</b>			<b>\$11,306.00</b>

Revision: 3AR2013R03

Vehicle Information

BHHC-Rate Version: 8.3.28.45

Unit	Liability	UM	UIM	Med Pay	Phys Dam	Cargo/ In-Tow	All/Lessor	Unit Sub Total
1 2012 POLARIS Comp/Coll: \$12,599 Radius: Up to 50 Miles	2,373 Deductible: 1,000/1,000	Incl.	Incl.	134	725	N/A	N/A	3,232
2 2012 POLARIS Comp/Coll: \$12,599 Radius: Up to 50 Miles	2,373 Deductible: 1,000/1,000	Incl.	Incl.	134	725	N/A	N/A	3,232
3 2012 POLARIS Comp/Coll: \$12,599 Radius: Up to 50 Miles	2,373 Deductible: 1,000/1,000	Incl.	Incl.	134	725	N/A	N/A	3,232



THE SCOOTER GUYS LLC  
Quote #: 2118210



Terms and Conditions: This quote is being offered subject to the following terms and conditions. BHHC disclaims any responsibility for your failure to reconcile the original application with coverage quoted herein. Failure to comply with the following conditions may result in cancellation.

- Inform which, if any, filings are required.
- Accurate Radius Classification.
- Compliance with UM/UIM Limit Requirements.
- No Transportation of Hazardous Materials, Garbage, Contaminated Soil, Asbestos, or similar exposures.
- Any driver < 21 years old must be submitted to company.
- Prompt reporting of all new drivers.
- All New Drivers must meet driver guidelines.
- Complete and Accurate Driver Information.
- 12.5% Commission applies.
- When bound, please provide appointed producer for this account with complete serial numbers, model years, and drivers list.
- Quote is subject to symbol 7 only.

Disclosure Statement: The premium for this account includes a commission that is within the terms of your normal commission schedule included within the provisions of your Agency Agreement. If your agency contract includes a Profit Sharing Agreement, this policy may or may not be included in that profit sharing plan. It's unclear at this time whether you will be eligible for profit sharing or whether this individual account will increase or decrease any profit sharing payout as the loss ratio is undetermined at this time and any payments are not guaranteed.

**This is NOT a binder of insurance. Company must be notified prior to Binding Coverage.**

Quote #: 2118210

## Schedule of Forms & Endorsements

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CA 0001 (03/2010) Business Auto Coverage Form  
CA 0162 (10/2007) Arkansas Changes  
CA 2108 (03/2006) Arkansas Uninsured Motorists Coverage  
CA 2166 (03/2006) Arkansas Uninsured Motorists Coverage - Property Damage  
CA 2402 (12/1993) Public Transportation Autos  
CA 3128 (03/2006) Arkansas Underinsured Motorists Coverage  
IL 0017 (11/1998) Common Policy Conditions  
IL 0021 (09/2008) Nuclear Energy Liability Exclusion Endorsement (Broad Form)  
IL 0231 (09/2008) Arkansas Changes - Cancellation  
IL 0909 (03/1998) Arkansas notice  
M 3912b (08/2001) Stated Amount Insurance  
M 3920 (03/1988) Punitive Damage Exclusion Duty to Defend Amendment  
M 4487 (04/1994) Auto Medical Payments Coverage  
M 4566a (11/1999) Certificate of Insurance - ID Card  
M 4572 (12/1994) Schedule of Forms and Endorsements at Policy Inception  
M 4803 (02/1998) Abuse or Molestation Exclusion  
M 5007a (10/2009) Arkansas Policyholders Important Notice  
M 5171 (06/2004) Schedule of Covered Autos  
M 5397 (02/2009) Driver List  
M 5479 (04/2010) Towing and Storing Costs  
M 5603 (01/2011) Commercial Policy Jacket  
M 5605 (02/2011) Business Auto Coverage Declarations  
M 5623 (04/2011) Application of Policy - Financial Responsibility  
M 5644 (09/2011) Arkansas Underinsured Motorists Coverage Amendatory Endorsement

# Driver Information for THE SCOOTER GUYS LLC

BHHC-Rate for Arkansas  
Cypress Insurance Company

Quote #: 2118210

Revision: 3AR2013R03

<u>Driver</u>	<u>Date of Birth</u>	<u>License Class</u>	<u>Years Exp.</u>	<u>Midterm</u>	<u>Unit</u>
1 Cole Stocking	8/11/1986	All Other			

THE SCOOTER GUYS LLC

M-4243b (6/2000)  
Cypress Insurance Company

Quote #: 2118210

**REJECTION OF UNINSURED AND UNDERINSURED  
MOTORISTS COVERAGES, AND OFFER OF INCREASED UNINSURED LIMITS  
(ARKANSAS)**

**I. UNINSURED MOTORISTS COVERAGE**

Under Arkansas Insurance Laws (Section 23-89-403 of the Arkansas Code), Uninsured Motorists Coverage provides insurance for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of **bodily injury**, sickness or disease, including death, resulting therefrom.

Uninsured Motorists Coverage (Section 23-89-404) also provides insurance for the protection of persons insured thereunder for **property damage** to the insured for losses in excess of two hundred dollars (\$200). "Property damage" means damage to the insured's vehicle.

Under the law (Section 27-19-605), the minimum limits for Uninsured Motorists Coverage are:

- at least \$25,000 of coverage of bodily injury/death for each insured person who may be injured in any single accident, and
- at least \$50,000 of coverage of bodily injury/death for two or more insured people who may be injured in any single accident, and
- at least \$25,000 of coverage for property damage in any single accident.

**A. Offer of Increased Limits or Selection of Minimum Limits**

Under Arkansas Insurance Laws (Section 23-89-403 of the Arkansas Code), if you choose **not** to reject Uninsured Motorists Coverage, you, the insured named in the policy, have the right to purchase uninsured motorists coverage in limits up to the limits of third-party liability coverage you will carry under your automobile insurance policy. Alternatively, the law also permits you to reject any offered increased limits.

<b>Offer of Increased Limits of Coverage</b>	<b>Amount of Increased Premium (if any)</b>
\$25,000 / \$50,000 / \$25,000 or \$75,000 Single Limit	Contact your agent for amount of
_____ / _____ / _____ or <u>1,000,000</u> Single Limit	increased premium.

**Choose one of the following ("X" indicates your choice) and complete the limits desired where indicated, if applicable.**

I wish to purchase increased limits of Uninsured Motorists Coverage.

If you marked this box, then you must specify the limits which you desire. These limits cannot exceed your third-party liability coverage.

I select: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ or 1,000,000 Single Limit

I wish to **REJECT** the offer of any and all increased limits of Uninsured Motorists Coverage.

**B. Rejection**

The law permits you, the insured named in the policy, to reject the Uninsured Motorists Coverage in its entirety or to reject the property damage only portion of the Uninsured Motorists Coverage. The law requires that if you **do not** reject Uninsured Motorists Coverage for **bodily injury**, the insurer will **automatically** provide you with the coverage in the minimum limits prescribed by law.

You may **not** reject Uninsured Motorists Coverage if increased limits of Uninsured Motorists Coverage is selected in Section A above.

**Choose one of the following, if applicable ("X" indicates your choice).**

- I hereby **REJECT** Uninsured Motorists Coverage. The Uninsured Motorists Coverage offered is completely removed and deleted from the policy.
  
- I hereby **REJECT** the property damage only portion of the Uninsured Motorists Coverage. The property damage only portion of the Uninsured Motorists Coverage offered is completely removed and deleted from the policy.

**II. REJECTION OF UNDERINSURED MOTORISTS COVERAGE**

Under Arkansas Insurance Laws (Section 23-89-209), Underinsured Motorists Coverage enables the insured or his/her legal representative to recover from the insurer the amount of damages for bodily injury or death to which the insured is legally entitled from the owner or operator of another vehicle whenever the liability insurance limits of such other owner/operator are less than the amount of the damages incurred by the insured. Coverage shall not be reduced by the other party's insurance coverage except to the extent the injured party would receive compensation in excess of his/her damages.

Underinsured Motorists Coverage is available **only if** Uninsured Motorists Coverage is **not** rejected above.

The law permits you, the insured named in the policy, to reject Underinsured Motorists Coverage.

**Mark the following, if applicable ("X" indicates your choice).**

- I hereby **REJECT** Underinsured Motorists Coverage. The Underinsured Motorists Coverage offered is completely removed and deleted from the policy. This coverage **MUST** be deleted if Uninsured Motorists Coverage is deleted.



\_\_\_\_\_  
Signature of Named Insured (Representing all insureds)

\_\_\_\_\_  
Type or Print Name



\_\_\_\_\_  
Date

\_\_\_\_\_  
Policy Number (if known)



## Direct Bill Options

Date: 09/27/2013

Named Insured: <b>THE SCOOTER GUYS LLC</b>	Quote Number: 2118210
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**Indicated Premium: \$11,306.00** (includes government fees and assessments, if applicable)

Pay Plan	Down Payment	Estimated Installment Amount(s)	Installments Due in Month(s) (Number of months after effective date of policy)
Full-Pay	\$11,306.00	-	-
2-Pay	\$5,653.00	\$5,653.00	5
4-Pay	\$2,827.00	\$2,826.50	2,5,8
6-Pay	\$2,262.00	\$1,808.96	1,3,5,7,9
11-Pay	\$2,262.00	\$904.48	1,2,3,4,5,6,7,8,9,10

(Assumes no filings or certificates requiring advance notice are required)

Each installment after the down payment will incur a(n) \$8.00 service fee.

**Waive the service fees** by signing up for *Simply EFT* - Automated Payment Authorization.

*Simply EFT* is a convenient, secure payment option which automatically deducts your insurance installment payments from your bank account or charges your credit/debit card when they become due. **The down payment must be paid separately - only installments due after automatic withdrawals are authorized will be deducted.** After making your down payment to bind your account, you will receive a schedule of payments that will show the date of your first *Simply EFT* withdrawal. If payment dates fall on a weekend or holiday, the payments may be executed on the next business day.

Questions? Call 1-877-680-2442 Monday - Friday, 7:00 AM - 7:00 PM Central Time to speak with a billing representative.

**Return this completed form to us by fax to 1-866-897-2393 or mail to the address above.**

**Sign me up using my Bank Account**

Bank Name: \_\_\_\_\_

Routing Number\*: \_\_\_\_\_ \*Please note that a routing number has exactly nine digits.

Account Type:     Checking Account     Savings Account

Account Number: \_\_\_\_\_

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**Sign me up using my Credit/Debit Card\***

Account Type:     Visa     Master Card     Discover     American Express

Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

\*A nominal transaction and reversal may appear on your statement due to the process we use to validate account information.

**\*\*I authorize the Berkshire Hathaway Homestate companies to initiate automatic payments for premium on my insurance policy and its renewals to my bank account or credit/debit card. This authority shall remain in effect until I revoke it (3 business days notice is required) in writing to the address above or by fax to 1-866-897-2393. I authorize my financial institution to debit the above designated bank account or to charge the above credit/debit card. I understand that I will receive advance notice of any increase in payments which result from endorsements to or renewal of my policy.\*\***

Account Holder /Card Holder Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Billing/Account Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_ AUTHORIZED SIGNATURE: \_\_\_\_\_





**From:** Anita May <Anita.May@dfa.arkansas.gov>  
**Sent:** Monday, February 10, 2014 11:20 AM  
**To:** Harter, James  
**Subject:** RE: Cole Stocking Fayetteville PD Application

Good morning Sergeant Harter,

I was told by our Motor Vehicle Manager that the Certificate of Origins that Mr. Stocking showed us on this GEM can be titled as a low speed vehicle. Mr. Stocking can register the vehicle with the Certificate of Origin with the other require documents at the revenue office. He can apply for the "For Hire" at that time. The low speed vehicle are for roads with the same speed as the vehicle will go. From the pictures I pulled off the internet on a GEM low speed vehicle it has all the require equipment to be on the road. Mr. Stocking told me his GEM vehicle will also have doors on them when we talked. When Mr. Stocking decide which GEM vehicle he will buy, he can e-mail me the certificate of origin and a picture of the GEM to make sure we can title it.

For Hire Taxi Cabs are required to have a \$50,000 bond from an insurance company licensed to do business in Arkansas. This along with all normal required documents and fees to register.

I hope this answers your questions.

Anita May  
DFA Supervisor  
(501)-682-4635