

## APPENDIX D

**PROPOSER INFORMATION — BEVERLY HILLS TAXICAB OPERATOR FRANCHISE**

Provide **all** of the following information and submit with your proposal in response to an RFP for taxicab franchise:

**Name of Organization/Firm:** \_\_\_\_\_

**Location of Organization's/Firm's Principal Place of Business:**

\_\_\_\_\_

Street Address	City	State	ZIP
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**Telephone:** \_\_\_\_\_ **FAX:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Beverly Hills Business License No:** \_\_\_\_\_

**Organization/Firm is a: (Circle One and complete)**

- |                               |                                    |
|-------------------------------|------------------------------------|
| Corporation in state of _____ | Attach Articles of Incorporation   |
| LLC in state of _____         | Attach Articles of Organization    |
| Partnership in state of _____ | Statement of Partnership Authority |
| LLP in state of _____         | Registered LLP Registration        |
| Cooperative in state of _____ | Attach Articles of Incorporation   |
| Association in state of _____ | Attach Articles of Incorporation   |
| Sole Proprietorship           | Attach appropriate documentation   |
| Other (Specify): _____        | Attach appropriate documentation   |

**List all owners, officers, partners, members and all stockholders with any ownership interest in the organization/firm, including any silent partners/investors. Attach copy of US or California government-issued photo identification for each person named. Attach additional sheets as necessary.**

Name	Title	SSN	DL#	%Ownership
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Name	Title	SSN	DL#	%Ownership
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Name	Title	SSN	DL#	%Ownership
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Name	Title	SSN	DL#	%Ownership
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Name	Title	SSN	DL#	%Ownership
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**List all management personnel. Attach copy of US or California government-issued photo identification for each person named. Attach additional sheets as necessary.**

Name	Title	Function/Role	SSN	DL#
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Name	Title	Function/Role	SSN	DL#
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Name	Title	Function/Role	SSN	DL#
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Name	Title	Function/Role	SSN	DL#
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1. Has the organization or any principal thereof ever been convicted in a criminal proceeding? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, complete Item 6.)
2. Has the organization or any principal thereof ever been a party to a civil proceeding in which it was held that it was engaged in anti-competitive business practices, violated state or federal laws or engaged in false/misleading advertising? Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, complete Item 6.)
3. Has the organization or any principal thereof ever had a business license revoked or suspended? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, attach a statement indicating the name of the person(s) involved, by whom and when the action was taken.)
4. Has the organization or any principal thereof ever been found in violation of any taxi operator's license or franchise agreement? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, attach a statement indicating the name of the person(s) involved, the date of the action and all relevant circumstances.)
5. Has the organization or any principal thereof ever initiated litigation against a franchising authority or had a franchising authority initiate litigation against it? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, attach a statement indicating the name of the person(s) involved, the name of franchising agency, the date and all relevant circumstances.)

6. If you have answered yes to question 1 or 2, please complete the following:

Date of Proceeding	Name	Location/Jurisdiction	Details: Charge, Penalty or Sanction

7. If you have answered yes to questions 3, 4, or 5, please use space below to provide additional information or attach additional sheets.

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8. If, during the last five years, any of your employees or members has been cited for operating a taxicab for hire without the required permits or licenses anywhere in the United States, or have been cited for any misdemeanor/felony while operating a taxicab, please complete the following: (use additional sheets as necessary)

Date of Violation	Name	Location/Jurisdiction	Details: Charge, Penalty or Sanction

9. Declaration of Non-Collusion

The undersigned certifies (or declares) under penalty of perjury that this proposal is genuine and truthful, not sham or collusive, or made in the interest or on behalf of any person, firm, or corporation not herein named; that the proposer has not directly or indirectly induced or solicited any other proposer to put up a sham proposal, or any other person, firm, or corporation to refrain from proposing, and that the proposer has not in any manner sought by collusion to secure to himself any advantage over other proposers.

Name, signature and title of persons authorized to represent and sign for organization:

Typed Name

Signature

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