

TAXICABS

Chapter 68

TAXI Cabs

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[HISTORY: Adopted by the Township Committee of the Township of Union (now Barnegat) 12-17-73. Amended 8- 19-85 by Ord. No. 1985-22. Amended 3-2-98 by Ord. No. 1998-4]

Be it ordained by the Township Committee of the Township of Barnegat, County of Ocean, State of New Jersey, as follows:

6801

9-5-00

§ 68-1. Definitions.

TAXICAB — A motor vehicle engaged in the business of transportation of passengers for hire within the township, operated from public places or from calls to a central **location**.

§ 68-2. License required.

No person, partnership, company, corporation or entity shall hire or use for hire or pay or cause to be used for hire or pay any taxicab without having obtained approval for a license by the Township Committee. No person shall operate or drive a taxicab within the township without having obtained approval for an operator's permit from the Township Committee.

§ 68-3. Issuance of License.

Application for licenses for taxicabs or operators' permits shall be made to the township upon a form provided by the Township Clerk. The application shall contain the full name and address of the owner or lessee and the applicant, the year, type and model number of the vehicle for which the license is sought, and the number of passengers the manufacturer of the vehicle states may be legally transported. The application shall be accompanied by the fees prescribed in this chapter. Each applicant shall be fingerprinted and photographed by the Township Police Department. No license may be issued for any vehicle that is more than nine (9) model years old or for a vehicle that cannot accommodate a minimum of three (3) passengers. Each applicant for a taxicab license or operator's permit shall submit to a police investigation, including a criminal background investigation.

§ 68-4. Fees.

Each taxicab shall be required to be licensed and the fee for each license shall be five hundred dollars (\$500.).

§ 68-5. Insurance.

Each application for a taxicab license shall be accompanied by an insurance certificate. The insurance required for each taxicab shall be in compliance with N.J.S.A. 48:16-1 et seq. Each taxicab shall have as a minimum requirement, an insurance policy which will guarantee payment for damages for an individual claim for bodily injury or death for at least one hundred thousand dollars (\$100,000.) and for multiple claims for bodily injury or death for at least three hundred thousand dollars (\$300,000.) for arising from a single incident, and for the payment of fifty thousand dollars (\$50,000.) for the payment of property damage from a single incident. Upon issuance of the taxicab license this insurance must be maintained and the insurance certificate kept current and on file with the Township Clerk.

§ 68-6. Power of attorney.

Upon issuance of a license the owner or lessee of a taxicab shall file with the Chief Financial Officer a power of attorney whereby the owner or lessee shall appoint the Chief Financial Officer as the lawful authority for service of process upon the taxicab licensee.

§ 68-7. Operator's permit.

Each operator or driver of a taxicab must be licensed by the township. The fee for such operator's or driver's license shall be fifty dollars (\$50.). Each operator's permit shall be numbered by the Township Clerk. The Township shall issue an operator's permit that shall contain the name, photograph and permit number of the operator.

§ 68-8. Registration.

The Township Clerk shall maintain a numerical register of the name and address of each person owning, leasing or

operating a taxicab as well as the year, model and manufacturer of each taxicab.

§ 68-9. Expiration and renewal.

Taxicab licenses and operator permits shall expire on December 31 of the year of issuance. Licenses may be renewed on an annual basis if applicants comply with the fees, terms and conditions of this chapter.

§ 68-10. Display.

Each operator shall be supplied a badge upon issuance of the operator's permit which shall be on conspicuous display within the taxicab while the taxicab is in operation for fee or hire. The owner license shall also be on conspicuous display within the licensed taxicab.

§ 88-11. Refusal to carry passenger.

No owner or operator of any taxicab, while waiting for employment at any place other than the garage or residence of the owner thereof, shall refuse conveyance to any person without just cause.

§ 88-12. Occupancy of taxicab by additional passengers.

No operator shall permit any person or persons other than the person or persons first employing the taxicab, to occupy or ride in said taxicab unless the person or persons first employing the taxicab shall consent to the acceptance of such additional passenger or passengers.

§ 68-13. Suspension or revocation of license.

Every owner's or operator's license granted hereunder may be suspended or revoked by the Township Committee, after notice and hearing, for the violation of any of the provisions of this chapter or for other good and sufficient cause. During said suspension and after revocation, the license shall be inoperative and of no effect and the license shall be surrendered to the township forthwith.

§ 68-14. Violations and penalties.

Any person in violation of any provision of this chapter shall, upon conviction, be subject to a fine not to exceed one thousand dollars (\$1,000.) or by incarceration in the county jail not to exceed ninety (90) days and/or revocation of the taxicab license or operator's permit.

Township of Barnegat

COUNTY OF OCEAN



900 WEST BAY AVENUE
BARNEGAT, NEW JERSEY 08005-1298
Email: clerk@barnegat.net

MUNICIPAL OFFICES: (609) 698-0080
FAX #: (609) 698-7980
Visit Our Website: www.barnegat.net

TAXICAB PERMIT APPLICATION CHECKLIST

OWNER NAME: _____

OWNER ADDRESS: _____

LESSEE NAME/ADDRESS: _____

VEHICLE YEAR/MAKE/MODEL: _____

VEHICLE PASSENGER CAPACITY: _____

\$500.00 ANNUAL PAID: _____

EACH TAXI OPERATOR PAID: _____

FINGERPRINTING COMPLETED (DATE): _____

POLICE INVESTIGATION COMPLETED (DATE): _____

CHIEF SIGNATURE: _____

OPERATOR'S ANNUAL INSURANCE REQUIREMENTS:

INDIVIDUAL OCCURRENCE:	\$ 100,000
MULTIPLE OCCURRENCES:	\$ 300,000
PROPERTY DAMAGE:	\$ 50,000

CURRENT CERTIFICATE SUBMITTED: _____

TOWNSHIP COMMITTEE APPROVAL DATE: _____

TOWNSHIP LICENSE NUMBER: _____ DATE: _____

TOWNSHIP OF BARNEGAT
900 WEST BAY AVENUE
BARNEGAT, NJ 08005
609-698-0080

APPLICATION FOR TAXICAB PERMIT

NAME OF BUSINESS: _____

ADDRESS: _____

TELEPHONE #: _____

NAME & SOCIAL SECURITY # OF OWNER: _____

NUMBER OF TAXI'S TO BE LICENSED: _____

MAKE, MODEL, YEAR AND VEHICLE REGISTRATION # OF EACH TAXI: EACH TAXI \$500.00 FEE

	<u>MAKE</u>	<u>MODEL</u>	<u>YEAR</u>	<u>VEHICLE REGISTRATION</u>
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____
3)	_____	_____	_____	_____
4)	_____	_____	_____	_____

NUMBER OF OPERATORS TO BE LICENSED: EACH OPERATOR \$50.00 FEE _____

NAME, ADDRESS, AGE, TELEPHONE # & DRIVERS LICENSE # OF EACH OPERATOR:

	<u>NAME</u>	<u>ADDRESS</u>	<u>AGE</u>	<u>PHONE #</u>	<u>D/L #</u>
1)	_____	_____	_____	_____	_____
2)	_____	_____	_____	_____	_____
3)	_____	_____	_____	_____	_____
4)	_____	_____	_____	_____	_____

NAME OF INSURANCE COMPANY INSURING TAXI'S AND OPERATOR'S: Copy to be attached: _____

AMOUNT OF POLICY LIMITS: _____

DATE OF EXPIRATION OF POLICY: _____

INSURANCE AGENT INFORMATION:

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #</u>
_____	_____	_____

DESIGNATED AREA TO BE SERVICED BY TAXI: _____

SET FORTH PROPOSED RATES TO BE CHARGED BY TAXI SERVICE: _____

TOWNSHIP OF BARNEGAT
900 WEST BAY AVENUE
BARNEGAT, NJ 08005
609-698-0080

APPLICATION FOR LIMOUSINE PERMIT

NAME OF BUSINESS: _____

ADDRESS: _____

TELEPHONE #: _____

NAME & SOCIAL SECURITY # OF OWNER: _____

NUMBER OF LIMO'S TO BE LICENSED: _____

MAKE, MODEL, YEAR AND VEHICLE REGISTRATION # OF EACH LIMO:

	<u>MAKE</u>	<u>MODEL</u>	<u>YEAR</u>	<u>VEHICLE REGISTRATION</u>
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____
3)	_____	_____	_____	_____
4)	_____	_____	_____	_____

NUMBER OF OPERATORS TO BE LICENSED: _____

NAME, ADDRESS, AGE, TELEPHONE # & DRIVERS LICENSE # OF EACH OPERATOR:

	<u>NAME</u>	<u>ADDRESS</u>	<u>AGE</u>	<u>PHONE #</u>	<u>D/L #</u>
1)	_____	_____	_____	_____	_____
2)	_____	_____	_____	_____	_____
3)	_____	_____	_____	_____	_____
4)	_____	_____	_____	_____	_____

NAME OF INSURANCE COMPANY INSURING LIMO'S AND OPERATOR'S: _____

AMOUNT OF POLICY LIMITS: _____

DATE OF EXPIRATION OF POLICY: _____

INSURANCE AGENT INFORMATION:

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #</u>
_____	_____	_____

DESIGNATED AREA TO BE SERVICED BY LIMO: _____

SET FORTH PROPOSED RATES TO BE CHARGED BY LIMO SERVICE: _____