*Elizabeth Y. Lint, Esq.*
*Executive Director*

# CAMBRIDGE LICENSE COMMISSION

Hackney Carriage Division

831 Massachusetts Avenue, First Floor, Cambridge, Massachusetts 02139

City of Cambridge

## Dispatch Association Permit Application

*Initial Application Fee: $175.00 • Annual Permit Fee: $250.00*

Is this an application for renewal? Yes_____ No_____

**Corporation Information**

Dispatch Association Corporation Name: _____

D/B/A (If Different from Corporate Name): _____

Corporation Address: _____ Suite/Unit: _____

City/Town: _____ State: _____ Zip Code: _____

Primary Corporate Contact Person: _____

Contact Telephone Number: _____ Contact Fax Number: _____

Contact Email Address: _____

Corporation Website Address: _____

**Headquarters Information**

Headquarters Address (If Different from Corporate Address): _____

Suite/Unit: _____ City/Town: _____ State: _____ Zip Code: _____

Headquarters Telephone Number(s) for Public Use: _____

Headquarters Fax Number: _____ Headquarters Email Address: _____

Primary Corporate Contact Person: _____

Contact Telephone Number: _____ Contact Fax Number: _____

Contact Email Address: _____

**Dispatch Association Operations Information**

By what means does the dispatch association provide services to the general public? Check all that apply.

Telephone Dispatch: _____ Mobile Phone Application: _____ Website: _____

Other (Please Explain): _____

**Dispatch Association Operating via Radio System**

F.C.C. License Number: _____ License Expiration Date: _____

Description of Equipment: _____

**Required Supplementary Documentation**

*Please submit the following supplementary documentation to the License Commission with this completed application. If you fail to submit any of the requested supplemental documents, your application will not be considered complete and will not be reviewed.*

1) Standard Emergency Response Plan for dispatchers and drivers to follow in emergencies;

2) An established policy for accommodating persons with disabilities in terms of accessing your means of dispatch; and

3) A description of employee training procedures to ensure compliance with *Article XIX, Rule 7* of the Cambridge Taxicab Rules and Regulations.

**For Renewal Applications Only**

You are required to submit an Annual Report to be reviewed with this application pursuant to *Article XIX, Rule 4*. The Annual Report must include the following:

a. a lists of all costs associated with being a member of the dispatch association;
b. a list of all costs charged to consumers for utilizing dispatch services;
c. a current list of all taxicab medallion numbers associated with your dispatch association;
d. number of service requests received during duration of current permit;
e. number of service requests successfully fulfilled during duration of current permit; and
f. number of service requests that were not fulfilled during duration of current permit with reasons as to why.

**Certification**

I certify under the pains and penalties of perjury, to the best of my knowledge and belief, that the above statements are true and correct.

Signature: _____

Print Name: _____

Corporate Officer Title: _____

Date: _____

**Any changes made to the information contained in this application must be reported in writing to the License Commission within three (3) business days.**