



Taxis, Access & Mobility Services Division

Color Scheme Permit Transfer Application

Name of Color Scheme:	
Color Scheme Business Address (Street Address, City, State, Zip)	
Mailing Address if different from above:	
Applicant Name:	
Email Address:	Phone:
Applicant Residence Address (Street Address, City, State, Zip)	
Mailing Address if Different from Above:	
Color Scheme Business Phone: ()	
Color Scheme Fax: ()	Color Scheme Email Address:
<p>COLOR SCHEME PERMIT TRANSFER CHECKLIST (please submit requirements and check relevant boxes).</p> <p>1. Color Scheme Permit Applicant has submitted a Business Operation Plan. <input type="checkbox"/></p> <p>2. Applicant has provided current San Francisco business license. <input type="checkbox"/></p> <p>3. Applicant has provided any signed partnership agreement among multiple purchasers or documentation of current valid corporate status. <input type="checkbox"/></p> <p>4. Applicant has provided a signed lease or other documents establishing the applicant's right of occupancy at a business premises. <input type="checkbox"/></p> <p>5. Name of Dispatch Service Color Scheme is affiliated with: _____</p> <p>6. Applicant has provided a signed agreement with a permitted dispatch service. <input type="checkbox"/></p> <p>7. Applicant has provided a schedule of gate fees. <input type="checkbox"/></p>	



Taxis, Access & Mobility Services Division

Color Scheme Permit Transfer Application

I, _____, am the person authorized to sign for the Applicant.
Print Name of Authorized Person

I will abide by and comply with all SFMTA rules and regulations.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Person Title Date

For SFMTA Staff:

Color Scheme Permit Applicant has filed the following documents:

- Staffing plan that conforms to Sec. 1106(h)(1)-(4)
- General Liability Insurance documentation
- Worker's Compensation documentation
- Records Maintenance Plan
- Vehicle Maintenance Plan
- Parking Plan
- Color Scheme conforms to SFMTA's reduced emissions program
- Copy of current City business license
- Designated manager form
- Copy of company drug-free workplace policy
- Sworn statement attesting to compliance with Article 1100
- List of medallions that will be affiliated with Color Scheme
- Color Scheme Change Application for each medallion

SFMTA TAXI SERVICES OFFICE USE ONLY

Date Received:	Date of Review:	SFMTA DTAS Decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied
Received by:	Date of Inspection:	Taxi Services Staff Reviewer: