

# Certificate of Public Convenience and Necessity Application Check List

Submit all documents in one package.

Receipt for Renewal Application Fee (\$100)	
List of rates/fares (taxi only)	
Route description/ map (taxi only)	
State of Alaska business registration \(\text{Verg}\)	
City of Valdez business registration	
Copy of Company Liability Insurance Certificate (with City of Valdez named as additional insured)	V
List of Current Drivers	
Copies of Chauffeur's License for each driver  Bruy TE Smith	
each driver (issued by PD)  V Carol E. White	
V GAN M. JOHNSON	
List of Vehicles on file	

Make and Model: Oodge Caravan License Plate:	Vehicle for Hire Permit (issued by PD)	1
JLG 774	Hire Vehicle Inspection Form (Must be complete & signed by Inspecting Officer with all issues resolved prior to submittal) (issued by PD)	1
$\checkmark$	Current Vehicle Insurance	V
Make and Model: CNTUY EGUNOX License Plate: KHV 136	Vehicle for Hire Permit	
KHV 134	Hire Vehicle Inspection Form (Must be complete & signed by Inspecting Officer with all issues resolved prior to submittal) (issued by PD)	
	Current Vehicle Insurance	
Make and Model:	Vehicle for Hire Permit	
License Plate:	Hire Vehicle Inspection Form (Must be complete & signed by Inspecting Officer with all issues resolved prior to submittal) (issued by PD)	
*	Current Vehicle Insurance	
Make and Model:	Vehicle for Hire Permit (issued by PD)	
License Plate:	Hire Vehicle Inspection Form (Must be complete & signed by Inspecting Officer with all issues resolved prior to submittal) (issued by PD)	
	Current Vehicle Insurance	

For Clerk's Office Use Only	noti
Date application and supporting documentation submitted:	Both remide palicies exprise exprise
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# 2025 APPLICATION FOR RENEWAL OF CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

Please complete the following form and provide the documentation requested on the attached checklist to the City Clerk' Office in a single packet.

Date: ///5/3035
Legal Name of and Address of Applicant Company:
Name and Address of Owner, Partners or Corporate Officers:  (SALM, JOHNSON (SALE proprietor)
POB 996, VAIDET AIC 99686
Columbia In Surace Company P
Location of Dispatch Office or Terminal:
Telephone No: 907-835-3500
Number of Vehicles by Virtue of this Certificate:
Are there any changes to your current routes from the previous year (taxi only)?  Yes No
If you answered yes, please describe changes:

Are there any changes to your rate/fare from the previous year (taxi only)?
Yes No No
Number of Drivers by Virtue of this Certificate:
All employees operating vehicles for hire within the City of Valdez must possess a valid Chauffer's license issued by the City.
Renewal Application Fee: \$100. Please visit the City Hall front office or call (907) 835-4313 to pay your fee for the current permit year. You may also submit a check payable to the City of Valdez with this application.
I, CHM DOWN, owner/agent for Wall of Whicles operated under the above company license; including names of all chauffeurs of such vehicles and dates and hours of their employment on each vehicle operated under such license. All such records shall be preserved by the above firm for not less than two years and shall be made available to the City of Valdez upon request. I further agree to comply with all regulations and requirements in Chapter 5.16 of the valdez Municipal Code.
Signature of Owner/Agent
Subscribed and sworn to before me this

ACORD

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/2/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the cartificate holder in lieu of such endorsement(s). NAME: Mellasa Haxlon FAX No.: 907-746-7275 Combs Insurance Agency, Inc. PHONE | 907-745-2144 341 S. Alaska St ADDRESS: combs@combsinsurance.com Palmer AK 99645 NAICE INSURER(5) AFFORDING COVERAGE INSURER A: COLUMBIA INSURANCE COMPANY 27812 License#: 775B INGURER B : INSURED Valdez Yellow Cab INSURER C : Gail M. Johnson, dba: INSURER D INSURER E : INSURER F: REVISION NUMBER: COVERAGES **CERTIFICATE NUMBER: 539402084** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP LIMITS TYPE OF INSURANCE INSO WYD POLICYNUMBER COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (En DECUMENCE CLAIMS-MADE OCCUR 3 MED EXP (Any one parson) PERSONAL & ADV INJURY GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OF AGG POLICY OTHER: COMBINED SINGLE LIMIT \$ 500,000 11/3/2025 11/3/2024 AUTOMOBILE LIABILITY 71APR431026 BODILY INJURY (Per person) ANY AUTO OWNED AUTOS ONLY HIRED SCHEDULED AUTOS NON-DWNED AUTOS ONLY BODILY INJURY (Per eccident) PROPERTY DAMAGE \$ AUTOS ONLY EACH OCCURRENCE UMBRELLA LIAB OCCUR AGGREGATE EXCESS LIAS CLAIMS-MADE DED RETENTIONS WORKERS COMPENSATION STATUTE AND EMPLOYERS LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACOIDENT NIA E.L. DISEASE - EA EMPLOYEE (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be etlached if more apage to required) Local Taxi Service CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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City of Valdez PO Box 307

Valdez AK 99686

POLICY NUMBER:

71 APR 431025

CA 20 48 02 99

# THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### **DESIGNATED INSURED**

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM MOTOR CARRIER COVERAGE FORM TRUCKERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" under the Who is An insured Provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

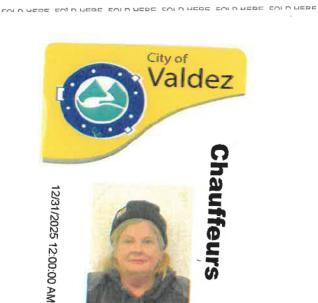
This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective: 11/03/2024 12:01 AM		Countersigned By:
Named Insured: GAIL M JOHNSON		(Authorized Representative)
	SCHE	DULE
Name of Person(s) or Organization(s):	CITY OF VALDEZ PO BOX 307 Valdez, AK 99886	

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to the endorsement.)

Each person or organization shown in the Schedule is an "insured" for Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who is An Insured Provision contained in Section II of the Coverage Form.

Alaska Insurance Identification Card 2022 CHEV EQUINOX Vehicle ID No. Policy Number | Effective Date | Expiration Date 02/15/25 08/15/24 Carol Elaine White Named Insured(s) Harry Davis White



**CAROL WHITE** Expires: 12/31/2025

DOB:



2022 CHEV EQUINOX Vehicle ID No.

08/15/24

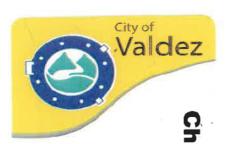
Policy Number | Effective Date | Expiration Date 02/15/25

Named

Carol Elaine White Insured(s) Harry Davis White



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12/31/2025 12:00:00 AM

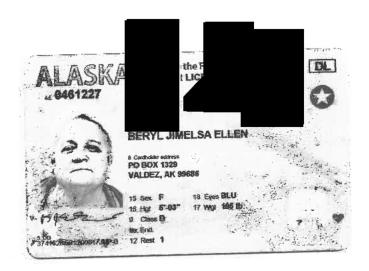


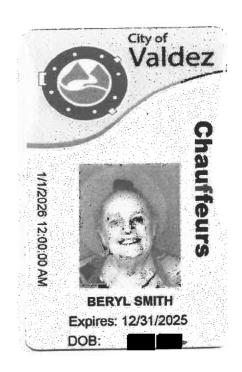
**GAIL JOHNSON** 

Expires: 12/31/2025

DOB:







# Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing PO Box 110806, Juneau, AK 99811-0806

This is to certify that

#### VALDEZ YELLOW CAB

POB 996, VALDEZ, AK 99686

owned by

GAIL M JOHNSON

is licensed by the department to conduct business for the period

October 25, 2024 to December 31, 2026 for the following line(s) of business:

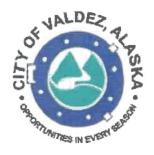
48-49 - Transportation and Warehousing



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States,

This license must be posted in a conspicuous place at the business location. It is not transferable or assignable.

Julie Sande Commissioner



# City Of Valdez 2025 Business Registration

**Business Name** 

Physical Address

**Business Phone Number** 

**Owner or Primary Contact** 

**Business Description** 

Taxi service

Valdez Yellow Cab

#95 Alderwood Trailer Park Valdez, Alaska , 99686

(907) 835-2500

Gail M Johnson

ISSUED BY

City of Valdez Community Development Department 212 Chenega Ave

PO Box 307 Valdez, AK 99686

communitydevelopment@valdezak.gov

Phone: 907-834-3401

**Approval Status** 

**APPROVED BY:** 

Kate Huber - Community Development Director Approved

**Approval Date** 

12/18/2024

**Expiration Date** 

12/31/2025

Auto ID

COV Business ID: 2025-133

This license is non-transferable and is issued in compliance with the City of Valdez, AK per Valdez Municipal Code 5.04.

#### **CUSTOMER COPY**

#### STATE OF ALASKA

#### **VEHICLE REGISTRATION**

#### DIVISION OF MOTOR VEHICLES

**EXPIRES LAST DAY OF:** PERM REG

LICENSE NO. **JLG774** 

-+CE CFF FIRE

TAB NO. P242007

CLASS 10

DATE 12/10/2024 VEHICLE IDENTIFICATION NO.

VEHICLE DESCRIPTION

DODG MAKE CVN MODEL 2013 YEAR VP BODY WHI COLOR 3500 WEIGHT

UNIT

FEES \$0.00 REGISTRATION \$0.00 TITLE \$0.00 LIEN \$0.00 **MVRT** \$0.00 INSPECTION \$10.00 TP/MISC \$10.00 TOTAL

OWNER/REGISTRANT BERYL JIMELSA ELLEN SMITH

MAILING ADDRESS



TITLE & REG

SENIOR CITIZEN 591 4137 12 10 2024 0941 LIENHOLDER NO LIEN

RESIDENCE ADDRESS **407 DYLEN DR** VALDEZ, AK 99686

# STATE OF ALASKA LIABILITY INSURANCE IDENTIFICATION CARD

INSURED: Beryl J E Smith 1329 POLICY NUMBER:

must not

EFFECTIVE DATE: 02/06/2024, 12:01AM

EXPIRATION DATE: 02/06/2025, 12:01AM

YEAR/MAKE/MODEL: 2013 Dodge Grand Caravan SE

VIN:

HARTFORD INSURER: Hartford Insurance Company of the Midwest

Asses 1980 St. Co.

4040 Vincennes Circle Indianapolis, IN 46268 on any DMV

mount of not of insurance in

he license number

t of the vehicle. You

The Alas less than

KEEP THIS CARD IN YOUR VEHICLE AT ALL TIMES. Not valid for more than one year

from the effective date. Coverage meets minimum liability required by law.

or drivers who aused to another

person. If there is a reasonable possionity may be round hable in a civil court, your privilege to drive will be suspended for up to three years.

It is illegi on the vi

A person form tha

the vehic Failure to

#### City of Valdez

## 2023 FOR HIRE VEHICLE INSPECTION

COMPANY: VELOW CAB FOR HIRE VEHICLE ID#
ADDRESS: DO BOX TELEPHONE# 9
REGISTERED OWNER OF VEHICLE: (ARO) E WHITE
VEHICLE MAKE CHEVY MODEL FOUNDY YEAR 3000
VEHICLE LICENSE# AK KHV 136 VIN#
INSPECTING OFFICER: Tay a - 23 DATE OF INSPECTION: 1 - 7- 25

ITEM	GOOD	FAIR	NEEDS REPAIR	REMARKS OR INSTRUCTIONS
Head Lights	1/			
Tail Lights	Va			
Brake Lights	1,			
Emergency Flashers	1			
Back Up Lights	//			,
Turn Signals	/,			
Top "Taxi" Light	1			
Interior Light	1			
Horn	1			
Windshield Wipers	1			
Exhaust System	1/			
Tires	11			
Vehicle Marked	1/			
Proper Lettering	1			
License Plate Light	V			
Steering	V			
Brakes	V			
Interior Conditions	V			

# City of Valdez, Alaska 2025 FOR HIRE VEHICLE PERMIT

# Registered Owner of Vehicle

Name: CAROL E. WHITE
Address: DO BOX 342 VALDEZ, AK 99686
Owner of Certificate of Public Convenience:
Name: GAN M. OCHUSM
Address:
Vehicle License No: KHV 136 ALASKA
VIN#: 26
Make:
Model: <u>EQUINOX</u>
Color: Delar Glary
Insurance Company:
Policy#
Vehicle Inspected by: 1 aylar
Date of Inspection:
Signature of Registered Owner: Caral Elithite
Signature of Holder of Certificate of Public Convenience:
Permit issued on 1-15-2025
Authorized By:
Part Hinkle thief of Police

# City of Valdez

# 2023 FOR HIRE VEHICLE INSPECTION

COMPANY: Valdez Yellow FOR HIRE VEHICLE ID# JLG 774
ADDRESS: P.O. Box 99 6, Valdez, A.C. TELEPHONE#_
REGISTERED OWNER OF VEHICLE: Bery 1 JE Smith
VEHICLE MAKE Dodge MODEL Caravan YEAR 2013
VEHICLE LICENSE# JLG-774 VIN#_
INSPECTING OFFICER: 161 DATE OF INSPECTION: 1/15/25

ITEM	GOOD	FAIR	NEEDS REPAIR	REMARKS OR INSTRUCTIONS
Head Lights	/			
Tail Lights	V	4		
Brake Lights	1			
Emergency Flashers	-			
Back Up Lights				
Turn Signals	V			
Top "Taxi" Light				
Interior Light	V			
Horn				
Windshield Wipers				
Exhaust System				
Tires			,	
Vehicle Marked	1			
Proper Lettering	/			
License Plate Light	-			
Steering	i l			
Brakes	V	7		
Interior Conditions				

# City of Valdez, Alaska 2025 FOR HIRE VEHICLE PERMIT

## Registered Owner of Vehicle

Name: Bery J.E. Smith
Address: P.O. Box 1329, Valdez, AK. 99686
Owner of Certificate of Public Convenience:
Name: GALL M. OOTINSM Trik.Pri
Address:
Vehicle License No: JLG 774
VIN#: 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Make: <u>Dodge</u>
Model: <u>Caravan</u>
Color: 3White
Insurance Company: Hart ford
Policy#
Vehicle Inspected by: Mithil
Date of Inspection: 115/25
Signature of Registered Owner:
Signature of Holder of Certificate of Public Convenience
Permit issued on 1.15.2025
Authorized By:
Bart Hinkle Chief of Police