

.....
Date February 25, 2013.....

**PUBLIC HEARING FOR RECLASSIFICATION OF AMBASSADOR MEDICAL
TRANSPORT SERVICES' LICENSE TO OPERATE A PARATRANSIT SERVICE TO A
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY TO OPERATE A
LIMOUSINE COMPANY**

WHEREAS, Ambassador Medical Transport Services currently holds a valid License to Operate a Paratransit Service; and

WHEREAS, Ambassador Medical Transport Services desires to operate as a limousine company; and

WHEREAS, Section 126-62 of the Municipal Code of the City of Des Moines, Iowa, forbids the operation of a limousine as defined under the limousine subchapter of the municipal code (Article IV of Chapter 126) as a vehicle for hire upon the streets of Des Moines without obtaining a certificate of public convenience and necessity; and

WHEREAS, Ambassador Medical Transport Services, 5059 Cherrywood Drive, West Des Moines, Iowa, has filed an application requesting permission of the City Council to operate a limousine service in the City of Des Moines, with a total of 2 vehicles; and

WHEREAS, pursuant to Section 126-64 on February 11, 2013, by Roll Call No. 13-0217, the City Council has fixed this date as the time and place for a public hearing on the matter of the application; and

WHEREAS, Section 126-65(a) provides if this Council finds at the conclusion of such public hearing that limousine, or further limousine, service in the City of Des Moines, or between any point or points in the City and elsewhere, is required by the public convenience and necessity and the applicant is fit, willing, and able to perform such public transportation and to conform to the provisions of the subchapter, then the Council shall direct the City Traffic Engineer to issue a certificate stating the name and address of the applicant, the number of vehicles authorized under said certificate and the date of issuance; otherwise the section provides the application shall be denied; and

WHEREAS, Section 126-65(b) provides that in making the findings of subsection (a) of said section, this Council shall take into consideration the number of limousines already in operation, whether existing transportation is adequate to meet the public need, the probable effect of increased service on local traffic conditions, and the character, experience, and responsibility of the applicant;

★ **Roll Call Number**

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NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Des Moines, Iowa:

That the hearing is hereby closed and the application is granted or denied, as the case may be, as set out in the next paragraph.

_____ Alternative One: That the application for a certificate of public convenience and necessity to operate a limousine service be approved and hereby granted and the City Traffic Engineer is directed to issue a certificate stating the name and address of the applicant, the number of vehicles authorized under the certificate, and the date of issuance, it being the finding of this City Council of the City of Des Moines that such service is required by the public convenience and necessity and that the applicant, Ambassador Medical Transport Services, is fit, willing, and able to perform such public transportation and to conform to the provisions of the subchapter, all as shown by the evidence brought forth at the public hearing;

or

_____ Alternative Two: That the application for a certificate of public convenience and necessity to operate a limousine service be hereby denied it being the finding of this City Council of the City of Des Moines that such service is not required by the public convenience and necessity, and/or that the applicant is unfit to perform such public transportation and unable to conform to the provisions of the subchapter, all as shown by the evidence brought forth at the public hearing.

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BE IT FURTHER RESOLVED that upon adoption of Alternative One (to grant the certificate), the City Traffic Engineer is hereby directed to issue a certificate to Ambassador Medical Transport Services stating the name and address of the applicant, the number of vehicles authorized under said certificate, as set out in the application, and the date of issuance.

(Council Communication Number 13-085 Attached)

MOVED BY _____ to adopt.

APPROVED AS TO FORM:

Mark Godwin
Deputy City Attorney

Table with 5 columns: COUNCIL ACTION, YEAS, NAYS, PASS, ABSENT. Rows include COWNIE, COLEMAN, GRIESS, HENSLEY, MAHAFFEY, MEYER, MOORE, and TOTAL.

CERTIFICATE

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

MOTION CARRIED APPROVED
Mayor

City Clerk

Limousine Company Application -

January 22, 2012

STATEMENT: I Michael R. Berry, Traffic Facilities Administrator with the City of Des Moines Engineering Department, Traffic & Transportation Division, certify that I have prepared the preceding "Limousine Company Application Checklist." The attached documents that have had information blocked out, if any, have had that information removed for identity theft protection of the applicant and others referenced by the applicant and to protect confidential records under Iowa Code Chapter 22. The original documents are on file in the City Traffic Engineers Office and the entire document(s) may be reviewed by anyone with the right to know, under provisions of Iowa Code Chapter 22.

Ambassador
Medical
Transport
Services,

_____ dated: _____, 20____
Michael R. Berry, Traffic Facilities Administrator, City of Des Moines

150 PARKS & REC.
515-281-1000
HAVE A GREAT DAY!

1:04PM AUG 3/11
00-0003 001 TRACY
#12617 CLERK

ENTER NAME
AMBASSADOR MED TRANS
TRAX/IM COMP \$50.00
ENTER MAKE
TRAX/IM COMP \$150.00

STU \$400.00
CHECK \$400.00



City of Des Moines

Office of Traffic & Transportation

License to Operate a Para-Transit Service

PARA-TRANSIT SERVICE

2011

This document certifies that

Ronald L Moore, dba "Ambassador Medical Transport Services." - 5059 Cherrwood Dr., West Des Moines IA 50265 (515) 729-9985

is a Licensed Para-Transit Service in the City of Des Moines. This License is issued contingent upon meeting the rules and standards, as set by the City of Des Moines Municipal Code, at all times, and according to Chapter 126 of said Municipal Code of the City of Des Moines.

Approved by Gary Fox, City Traffic Engineer
For the City of Des Moines, Iowa

Gary L. Fox

City of Des Moines - Office of Traffic & Transportation

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Vehicle Licenses @ \$75 each - Receipt Not a Date

Aug 3, 2011 11-12617

Fee Paid: \$700.00 - Certificate

THIS LICENSE EXPIRES ON THE 31ST DAY OF DECEMBER 2011



CITY OF DES MOINES
Office of
TRAFFIC AND TRANSPORTATION

TO: SPO Mike West, Traffic Unit
DM Police Department

DATE: December 17, 2012

FROM: Mike Berry
Eng. Dept. – Traffic Div.

SUBJECT: Transmittal of Request for a Certificate
of Public Necessity to operate a
Para-Transit Co. – Mr. Ronald L. Moore, Sr.

Mike,

Attached, you will find the information that I have been provided by the applicant, Ronald L. Moore, Sr, applying for a Certificate of Public Necessity to operate a Limousine Company. Please note, on or about June 9, 2011 you previously reviewed this individuals information, as part of an application process to operate a Para-Transit Company, and no problems were found.

Under §126-63.5 the Police Department has a requirement to investigation the criminal and drivers records of an applicant, when applying for a license to operate as a Limousine company, in the City of Des Moines.

Please see the attached documents. The company to be licensed as a Limousine Company is called Ambassadors Medical Transport Services, LLC.

The applicant has operated a Para-Transit company, in the Des Moines area since mid-2011 with no complaints or problems.

If you have any questions or further comments regarding this matter, please feel free to contact me. Thanks.

Michael R. Berry
Traffic Facilities Administrator

Encl.

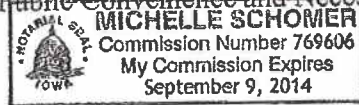
VERIFICATION
[use for a sole proprietorship]

Signature of sole proprietor: Ronald L. Moore

STATE OF IOWA)
) ss:
COUNTY OF _____)

On this 13 day of NOV, 2012, before me, a notary public, personally appeared RONALD L. MOORE, who first being duly sworn, states that the
[Printed/typed name of sole proprietor]

information in the attached Application for Certificate of ~~Public Convenience and Necessity~~
is true and correct.



Notary Public in the State of Iowa



Search...

Revenue Home

Your Iowa Business Tax Registration has been successfully submitted. Please print this page for your records.

Within 4-8 weeks, you will receive in the mail:

- Sales Tax & Retailer's Use Tax : A letter containing your Business eFile Number (BEN), your permit number, and a printed permit.
- Consumer's Use Tax & Withholding: A letter containing your Business eFile Number (BEN) and your permit number. The letter will not include a printed permit.

A tax return must be filed even if you had no activity or no tax due.

Press **Ctrl + P** to print

IOWA BUSINESS TAX REGISTRATION FORM

BUSINESS INFORMATION

Legal Name: Ronald L. Moore

Trade Name: Ambassadors Medical Transport

Location: 5059 Cherrywood dr,
West Des Moines, IA 50265

County: Polk - 77

Phone1: 515 729 9985

Phone2: 515 249 8295

Fax: 515 339 7641

Activity: Non Emergency Transportation
Prev Owner:

BUSINESS OWNERSHIP

Ownership: Limited Liability Company

BUSINESS DETAILS

Fed ID 32 0324342
Established On: 11/10/ 10

SALES DEPENDENT TAXES

HOTEL /MOTEL TAX

Permit? Not Needed

AUTOMOBILE RENTAL TAX

Permit? Not Needed

HOUSEHOLD HAZARDOUS MATERIAL

Permit? Not Needed

CONSUMER'S USE TAX

Permit? Not Needed

WITHHOLDING TAX

Permit? Not Needed

CORPORATION/PARTNERSHIP INCOME TAX

Permit? Not Needed

SIGNATURE

Full Name: Ronald L. Moore

SSN:

Date: 1/7/2013

