

CITY OF KETCHIKAN

APPLICATION FOR 2025 PUBLIC VEHICLE CERTIFICATE

Return this application to:

City Clerk's Office, Fourth Floor, City Hall, 334 Front Street, Ketchikan, Alaska 99901

PLEASE ALLOW A MINIMUM OF ONE WEEK FOR PROCESSING

This application must be verified under oath and completed in detail. Please attach such additional sheets as necessary.

| Application for: Check one Child Transport Vehicle Handicapped Transport Vehicle Limousine Sightseeing Taxicab | | | | |
|---|--|--|--|--|
| Applicant: | | | | |
| Business Name: | | | | |
| Address: | | | | |
| Contact Information: Phone Cell Phone | | | | |
| Email address: | | | | |
| Principals and Addresses: | | | | |
| Experience of applicant in the transportation of passengers: | | | | |
| Narrative statement describing in detail the precise nature of the applicant's operation and th service to be provided, clearly demonstrating that the service applied for shall be conducted a that type of service only and not as a taxicab: | | | | |
| | | | | |
| | | | | |
| | | | | |

showing required signage.

| Registered owner of | | | | |
|---|---|---|--|------------|
| Location of proposed | d depots and termin | als, if any: | | |
| Attach a statement t | ting condition togetl | ner with a signed r | eport to that <mark>effect i</mark> | |
| days by a third party Atta | <mark>y qualified mechani</mark> ched: YES | | Chief of Police. | |
| Has the applicant l | been convicted of a | any felony or mis | demeanor offenses | within |
| | YES | NO | | |
| Certificate of autom coverage (minimum for taxicabs), 30-day <mark>should list the City o</mark> | combined single ling cancellation claus | nit of \$1,000,000 fo e and payment of | or sightseeing vehicle premium attached | les and \$ |
| Atta | ched: YES | NO | | |
| For taxicab operati lettering or number vehicle: | | | | |
| | | | | |
| | | | | |

| 13. | For taxicab operations, the complete financial status of the applicant, including, but not limited to, amounts of all unpaid judgments against the applicant and the nature of the transaction or acts giving rise to said judgments (attach additional sheets as necessary): | | | | | |
|--------|---|--|--|--|--|--|
| | | | | | | |
| 14. | License fee of \$30 to engage in the public vehicle business, plus a fee of \$50 for each vehicle operated under a certificate. | | | | | |
| | Check for fee attached: YES NO Amount \$ | | | | | |
| | Dated this, | | | | | |
| conte | read the foregoing application and any attachments thereto, and that I am familiar with the nts thereof; and that the statements therein contained are true to the best of my knowledge, mation and belief. | | | | | |
| | Signature | | | | | |
| | Address | | | | | |
| | City, State | | | | | |
| | Subscribed and sworn to before me this day of | | | | | |
| | Notary Public for the State of Alaska My Commission Expires: | | | | | |
| (seal) | | | | | | |

Checklist for Applicant o Application Form

- Insurance Certificate
- o Mechanic's Certificate(s) Inspection must be issued within 10-days.
- o Filing Fee
- o License plate numbers
- No tours on 3rd Ave or Schoenbar
- o No soliciting for tours while walking around on the Port



KETCHIKAN POLICE DEPARTMENT

CITY OF KETCHIKAN 361 MAIN STREET, KETCHIKAN, AK 99901 (907) 225-6631



MEMORANDUM

TO: Kim Stanker, City Clerk

FROM: Eric Mattson, Police Chief

DATE: January 8, 2025

RE: Approved Mechanic List

Per Ketchikan Municipal Code (KMC) 5.40.060 the following is the approved list of mechanics:

- 1. All American Auto
- 2. Dan's Automotive Services
- 3. The Carriage Works
- 4. Shaub Ellison
- 5. Shane Luna
- 6. The Auto Works
- 7. Lighthouse Tesoro
- 8. Westside Services
- 9. J and M Mechanics
- 10. Mike Sivertsen for Marble Construction/Bonfire Bay Tour Company
- 11. Matthew Ernst
- 12. Alaska Diesel Power, Inc.
- 13. Leo Driscoll
- 14. Greg Cobbs for Dolly's Enterprises, LLC
- 15. Eric Erickson for Cape Fox Tours, LLC
- 16. Dale Lowell for DNB Automotive
- 17. Dillon Taylor for Ketchitour
- 18. Neil Thomson for Pit Stop
- 19. Bobcat of Ketchikan

Sincerely,

Eric Mattson



Vehicle Inspection Report

This inspection meets the qualification requirements in KMC 5.40.030(a)(7)

| Date | е | |
|---------------------|---------|--|
| Add | lress | |
| | | te, Zip Code |
| City | , 514 | e, 21p code |
| Valei | 1 | ponents inspected, mark X Yes, ok; mark X No, not ok; |
| | not app | |
| OK | | ny |
| Yes | No | 1. BRAKE SYSTEM |
| 105 | 110 | a. Service brakes |
| | | b. Parking brake system |
| | | c. Brake drums or rotors |
| | | d. Brake hose |
| | | e. Brake tubing |
| | | f. Low pressure warning device |
| | | g. Tractor protection valve |
| | | h. Air compressor |
| | | i. Electric brakes |
| | | j. Hydraulic brakes |
| | | k. Vacuum systems |
| | | 2. COUPLING DEVICES |
| | | a. Fifth wheels |
| | | b. Pintle hooks |
| | | c. Drawbar/towbar eye |
| | | d. Drawbar/towbar tongue |
| | | e. Safety devices |
| | | f. Saddlemounts |
| | | 3. EXHAUST SYSTEM |
| | | a. Any exhaust system determined to be leaking at a point |
| | | forward of or directly below the driver/sleeper |
| | | compartment |
| | | b. A bus exhaust system leaking or discharging to the |
| | | atmosphere in violation of standards (1), (2), or (3) |
| | | c. No part of the exhaust system of any motor vehicles shall |
| | | be so located as would be likely to result in burning, |
| | | charring, or damaging the electrical wiring, the fuel |
| | | supply, or any combustible part of the motor vehicle. |
| | | 4. FUEL SYSTEM |
| | | a. Visible leak |
| | | b. Fuel tank filler cap missing |
| | | c. Fuel tank securely attached |
| 5. LIGHTING DEVICES | | 5. LIGHTING DEVICES |
| | | All lighting devices and reflectors required by Section 393 |
| | | shall be operable |
| | | 6. SAFETY |
| | | a. Part(s) of vehicles or condition of loading such that the |
| | | spare tire or any part of the load or dunnage can fall onto |
| | | the roadway. |
| | | b. Protection against shifting cargo |
| | | c. All Seatbelts Operational |
| | l | d. Horn Operational |

| Inspector's Name (print) | | | | | |
|--|--|--|--|--|--|
| Vehicle Identification (check and complete both) | | | | | |
| | | 1 | | | |
| ☐ La | st four | of Vehicle ID Number | | | |
| Numl | | | | | |
| | ate No. | | | | |
| □Ye | ear/Mak | <u></u> | | | |
| | | 1 | | | |
| | AY | | | | |
| Yes | No | 7. STEERING MECHANISM | | | |
| | | a. Steering wheel free play | | | |
| ļ | ļ | b. Steering column | | | |
| | | c. Front axle beam and all steering components other than | | | |
| ļ | ļ | steering column | | | |
| | | d. Steering gear box | | | |
| | | e. Pitman arm | | | |
| | | f. Power steering | | | |
| | | g. Ball and socket joints | | | |
| | | h. Tie rods and drag links | | | |
| | | i. Nuts | | | |
| | | j. Steering system | | | |
| | | 8. SUSPENSION | | | |
| | | a. Any U-bolt(s), spring hanger(s), or other axle positioning | | | |
| | | part(s) cracked, broken ,loose or missing resulting in shifting | | | |
| | | of an axle from its normal position | | | |
| | ļ | b. Spring assembly | | | |
| | ļ | c. Torque, radius or tracking components | | | |
| | ļ | 0.7004345 | | | |
| | | 9. FRAME | | | |
| <u> </u> | | a. Frame members b. Tire and wheel clearance | | | |
| | | | | | |
| | <u> </u> | c. Adjustable axle assemblies (Sliding subframes) | | | |
| | | 10. TIRES | | | |
| | <u> </u> | a. Tires on any steering axle of a power unit | | | |
| | - | b. All othe tires | | | |
| | | 11. WHEELS AND RIMS | | | |
| | ļ | a. Lock or side ring | | | |
| | | b. Wheels and rims | | | |
| | | c. Fasteners | | | |
| | | d. Welds | | | |
| | | 12. WINDSHIELD GLAZING | | | |
| | | Clean of any cracks, discoloration or vision reducing matter | | | |
| | | | | | |
| | | 13. WINDSHIELD WIPERS | | | |
| | | Any power unit that has an inoperative wiper, or missing or | | | |
| <u> </u> | ļ | damaged parts that render it ineffective | | | |
| | | 14. Test Drive | | | |
| | | a. Ignition Switch Operator & Starter Operation | | | |
| | - | b. Lamp Functionality | | | |
| <u> </u> | | c. Park Brake Adjustment, Hold & Release, Lever Operation d. Steering & Accelerator Operation & Feel | | | |
| | | e. Cruise Control (If equipped) | | | |
| | | f. Steering Wheel Index, Steering Effort & Response | | | |
| | | g. Brake Pedal Height, Pedal Pad, Braking Effort, Pulsation or | | | |
| | | Noise | | | |
| | † | h. Shock Absorber Function & Feel | | | |
| | † | i. 4 x 4 Operation | | | |
| | | j. Shift Quality & Clutch Operation | | | |
| | <u> </u> | k Power Window Operation & Master Switch | | | |

CERTIFICATION: This vehicle has passed all the inspection items for the Vehicle Inspection Report in accordance with KMC 5.40.030(a)(7) and 5.40.060.

| By:_ | | |
|------|--------------------------|--|
| · | (signature of inspector) | |