

Board Office Use: Legislative File Info.	
File ID Number	16-2467
Introduction Date	11/30/2016
Enactment Number	16-548
Enactment Date	11/30/16 <i>OS</i>



OAKLAND UNIFIED
SCHOOL DISTRICT

Community Schools, Thriving Students

Memo

To Board of Education

From Vernon Hal, Senior Business Officer
Sondra Aguilera, Deputy Chief Student Services

Board Meeting Date November 30, 2016

Subject **AMENDMENT to the Agreement between the District And Friendly Transportation, Inc.**

Action Requested **Approval of Amendment to the Agreement between the District And Friendly Transportation, Inc.**

Background and Discussion By Enactment No. 14-1134, the Board approved an Agreement with the Friendly Transportation, Inc. to provide transportation services to special education students as provided in the student's IEP or alternative arrangements with the family. The purpose of the amendment is to extend the term of the Agreement to cover the period from July 1, 2015 through June 30, 2018. The Amendment is retroactive to July 2015 because no contract was in place for the school 2015-16 school year and invoices cannot be processed. There are no further changes in the Agreement.

Recommendation **Approval of Amendment to the Agreement between the District And Friendly Transportation, Inc.**

Fiscal Impact Resource – Special Education Fund

Attachments

- Amendment
- Agreement



CONTRACT JUSTIFICATION FORM
This Form Shall Be Submitted to the Board Office
With *Every* Consent Agenda Contract.

Legislative File ID No. 16-2467

Department: False

Vendor Name: Friendly Transportation

Contract Term: Start Date: 7-1-2015 6/3/8

Annual Cost: \$ not to exceed \$200,000

Approved by: Senior Business Officer

Is Vendor a local Oakland business? Yes ☒ No ☐

Why was this Vendor selected?

This vendor has continued to provide transportation services to OUSD students.

Summarize the services this Vendor will be providing.

Friendly Transportation will provide transportation services to special education students as provided in the students' IEP or alternative arrangements with the family.

Was this contract competitively bid? Yes ☐ No ☒

If No, answer the following:

1) How did you determine the price is competitive?

2) Please check the competitive bid exception relied upon:

- ☐ **Educational Materials**
- ☒ **Special Services** contracts for financial, economic, accounting, legal or administrative services
- ☐ **CUPCCAA exception** (Uniform Public Construction Cost Accounting Act)
- ☐ **Professional Service Agreements** of less than \$87,800 (increases a small amount on January 1 of each year)
- ☐ **Construction related Professional Services** such as Architects, DSA Inspectors, Environmental Consultants and Construction Managers (require a "fair, competitive selection process)
- ☐ **Energy** conservation and alternative energy supply (e.g., solar, energy conservation, co-generation and alternate energy supply sources)
- ☐ **Emergency** contracts [requires Board resolution declaring an emergency]
- ☐ **Technology** contracts
 - ☐ electronic data-processing systems, supporting software and/or services (including copiers/printers) over the \$87,800 bid limit, must be competitively advertised, but any one of the three lowest responsible bidders may be selected
 - ☐ contracts for computers, software, telecommunications equipment, microwave equipment, and other related electronic equipment and apparatus, including E-Rate solicitations, may be procured through an RFP process instead of a competitive, lowest price bid process
 - ☐ Western States Contracting Alliance Contracts (WSCA)
 - ☐ California Multiple Award Schedule Contracts (CMAS) [contracts are often used for the purchase of information technology and software]
- ☐ **Piggyback" Contracts** with other governmental entities
- ☐ **Perishable Food**
- ☐ **Sole Source**
- ☐ **Change Order for Material and Supplies** if the cost agreed upon in writing does not exceed ten percent of the original contract price
- ☐ **Other, please provide specific exception**

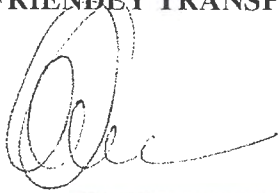
Board Office Use: Legislative File Info.	
File ID Number	16-2467
Introduction Date	11/30/2016
Enactment Number	16-1848
Enactment Date	11/30/16 OR

**AMENDMENT TO THE
AGREEMENT
Between
OAKLAND UNIFIED SCHOOL DISTRICT
and
FRIENDLY TRANSPORTATION, INC.**

1. By Enactment 14-1134, the Board approved an agreement with the Friendly Transportation, Inc. to provide transportation services to special education students as provided in the student's IEP or alternative arrangements with the family. The purpose of the amendment is to extend the term of the Agreement to cover the period from July 1, 2015 through June 30, 2018.
2. This Amendment is incorporated by reference into the Agreement, which is attached hereto.
3. Except as expressly provided above, the Agreement is unchanged.
4. **Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion:** The Parties certify to the best of their knowledge and belief, that they are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or CONTRACTOR according to Federal Acquisition Regulation Subpart 9.4, and by signing this contract, verifies that this vendor does not appear on the Excluded Parties List.
<https://www.sam.gov/portal/public/SAM>
5. All understandings, agreements, covenants, and representations express or implied, oral or written between the Parties are contained and merged herein. No other agreements, covenants, or representations, express or implied, oral or written, have been made by or between the Parties concerning the subject of this Amendment. This is an integrated agreement. It may not be altered, modified or otherwise changed in any respect except in a writing signed by each party.

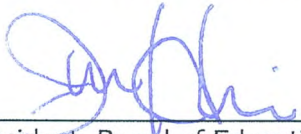
IN WITNESS WHEREOF, the parties hereto agreed to be bound and have executed this Amendment to the Agreement.

FRIENDLY TRANSPORTATION, INC.



SWINDELL K. MANN Sec.
Print Name and Title

OAKLAND UNIFIED SCHOOL DISTRICT

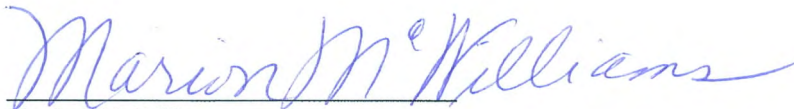


President, Board of Education
Oakland Unified School District



Superintendent and Secretary, Board of Education
Oakland Unified School District

Approved As to Form



Marion McWilliams
General Counsel

Board Office Use: Legislative File Info.	
File ID Number	14-0593
Introduction Date	6/25/14
Enactment Number	14-7134
Enactment Date	6/25/14



**OAKLAND UNIFIED
SCHOOL DISTRICT**

Community Schools, Thriving Students

Memo

To The Board of Education
From Gary Yee, Ph.D., Superintendent
 By: Maria Santos, Deputy Superintendent, Instruction, Leadership & Equity-in-Action
 Vernon Hal, Deputy Superintendent, Business & Operations

Board Meeting Date
 (To be completed by
 Procurement)

Subject Professional Services Contract -
Friendly Transportation, Inc., Oakland, CA (contractor, City State)
Programs for Exceptional Children (site/department)

Action Requested Approval of a professional services contract between Oakland Unified School District and Friendly Transportation, Inc.. Services to be primarily provided to Programs for Exceptional Children for the period of 07/01/2013 through 06/30/2015.

Background
 A one paragraph explanation of why the consultant's services are needed.

Some students' Free and Appropriate Public Education requires accessing special education services/programs in another district. In these cases, the district of residence is responsible for transporting students to the recommended school site. The District's contract with the school bus company only covers transport to schools within the Oakland Unified School District. A contract with a company that provides an alternative transportation method ensures that all students are provided.

Discussion
 One paragraph summary of the scope of work.

A contract for services between OUSD and Friendly Transportation, Inc., Oakland, CA, for the latter to provide transportation services as requested by the District each school day to follow school calendar. Friendly Transportation, Inc. uses reasonable efforts to coordinate transportation of students including the pick up and drop off times and locations during each school day to ensure that the student will arrive to school and home.

Recommendation Approval of professional services contract between Oakland Unified School District and Friendly Transportation, Inc.. Services to be primarily provided to Programs for Exceptional Children for the period of 07/01/2013 through 06/30/2015.

Fiscal Impact Funding resource name (please spell out) Special Education
Special Education not to exceed \$ 200000

Attachments

- Professional Services Contract including scope of work
- Fingerprint/Background Check Certification
- Commercial General Liability Insurance Certification
- TB screening documentation
- Statement of qualifications

Independent Contractor Agreement for the Provision of Transportation Services

THIS INDEPENDENT CONTRACTOR AGREEMENT ("Agreement") is entered into as of July 1, 2013 between Friendly Transportation, Inc. ("Contractor") and Oakland Unified School District (the "District"), with the following facts.

- A. Certain student(s) of the District require transportation to and from school and/or other transportation services as requested by the District.
- B. The District will reimburse the Contractor for the provision of such services, in accordance with the terms and provisions of this Agreement.

NOW THEREFORE, for a valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

1. Contractor Services

District may request, from time to time, that Contractor perform transportation services, which Contractor may agree to perform. To the extent accepted by Contractor, Contractor agrees to provide such transportation services and District agrees to pay Contractor in accordance with the provisions of this Agreement. The Contractor's services provided pursuant to this Agreement are sometimes referred to herein as the "Services."

2. Term

There term of this agreement shall commence on July 1, 2013, and shall terminate June 30, 2015. With the possibility of extending yearly agreed upon by both parties.

3. Fees for Services

The Contractor shall be paid the agreed sum based on fees outline on Attachment 1. The Contractor shall invoice the District for the provision of the Services on a monthly basis and shall be paid therefore within thirty (30) days after the District's receipt of the Contractor's invoice for the provision of the Services for the relevant month.

4. Vehicles

The Contractor agrees to supply, at its sole cost and expense, such vehicles, (the "Vehicles") as may be necessary to lawfully perform the Services. All such Vehicles shall fully comply with all applicable laws and regulations. The Contractor shall be solely responsible for all Vehicles used in transporting students.

5. Accidents or Emergencies

Contractor shall require that its employees and/or independent contractors or agents to notify CONTRACTOR'S dispatcher by phone or radio in the event of any traffic accident or medical emergency that involves a vehicle used in the performance of this Agreement. CONTRACTOR'S

dispatcher shall promptly advise the appropriate authorities, parent/guardian (or emergency contact if parent/guardian is not available), and Oakland Unified designee of the accident or emergency.
OUSD Designee:

Mary Conner, Special Education Coordinator
Phone: 510-874-3732
Email: mary.conner@ousd.k12.ca.us

Robin Sasada, Special Education SELPA Program Manager
Phone: 510-874-3702
Email: robin.sasada@ousd.k12.ca.us

6. Contractors Personnel

The Contractor shall, at its sole cost and expense, provide qualified and properly licensed personnel as required by laws and regulations and as deemed appropriate by the Contractor to perform the Services. While Contractor may use independent contractor drivers to provide Services under this Agreement, Contractor shall at all times remain responsible for the provision of Services under this Agreement. The Contractor expressly represents and warrants to the District that its personnel, including independent contractor drivers, are trained, tested and properly licensed to perform the Services.

7. Contractors Insurance

The Contractor shall at its sole cost and expense obtain and maintain in full force and effect during the term of this agreement general liability and automobile (common carrier) insurance issued by carrier(s) admitted in California, with minimum primary limits of One Million Dollars (\$1,000,000).

Additionally, the Contractor shall, at its sole cost and expense, obtain and maintain in full force and effect during the term of this agreement, umbrella or excess insurance coverage in an amount not less than Five Million Dollars (\$5,000,000), following the form of the underlying coverage.

The District shall be named as an additional insured party of the policy or policies, and shall be furnished with a certificate of insurance (COI) requiring notice to District of at least thirty (30) days prior to cancellation of any such policy or policies (except 10 days for non-payment).

8. Fingerprinting of Employees and Agents.

The fingerprinting and criminal background investigation requirements of Education Code section 45125.1 apply to Contractor's services under this Agreement and Contractor certifies its compliance with these provisions as follows: "Contractor certifies that Contractor has complied with the fingerprinting and criminal background investigation requirements of Education Code section 45125.1 with respect to all Contractor's employees, subcontractors, agents, and subcontractors' employees or agents ("Employees") regardless of whether those Employees are paid or unpaid, concurrently employed by OUSD, or acting as independent contractors of Contractor, who may have contact with OUSD pupils in the course of providing services pursuant to the Agreement, and the California Department of Justice has determined that none of those Employees has been convicted of a felony, as that term is defined in Education Code section 45122.1. Contractor further certifies that it has received and reviewed fingerprint results for each of its Employees and Contractor has requested and

reviews subsequent arrest records for all Employees who may come into contact with OUSD pupils in providing services to the District under this Agreement. Contractor shall not permit its employees or agents to come into contact with students until CDOJ and FBI clearance is ascertained.

9. Health and Safety (Tuberculosis Testing)

The Contractor shall require that all independent contractor drivers and other individuals who may come in contact with student(s) provide verification of having been tested for tuberculosis (TB) and cleared to work with students, as evidenced by a state licensed medical doctor's signature. The Contractor shall keep a copy of said information in the independent contractor driver or employee file.

10. Drug-Free / Smoke Free Policy

Contractor understands that OUSD does not permit drugs, alcohol, and/or smoking at any time in any buildings and/or grounds on OUSD property. Contractor shall not permit its employees, independent contractors or agents to smoke in vehicles used to transport OUSD students and will adhere to OUSD's drug free/smoke free policy. Contractor shall take reasonable steps to prevent its employees from exposing any pupil to impropriety of word or conduct. Contractor shall require that drivers comply with all safety laws and regulations, including but not limited to the prohibition against driving while under the influence of drugs or alcohol. Such prohibition shall extend to the use of prescription and non-prescription drugs that impair the safe operation of the vehicle.

11. Drug and Alcohol Testing

The Contractor shall require that all employees and independent contractor drivers and other individuals who may come in contact with student(s) shall be subjected to pre-employment or pre-contract, just cause and on-going random drug and alcohol testing in accordance with the requirements of federal law. Contractor agrees to immediately dismiss any employee or independent contractor driver who tested positive for drugs or alcohol in violation of applicable law, rule or regulation.

12. Non-Discrimination

Consistent with the policy of OUSD in connection with all work performed under Contracts, Contractor shall not engage in unlawful discrimination in employment on the basis of actual or perceived race, color, national origin, ancestry, religion, age, marital status, pregnancy, physical or mental disability, medical condition, veteran status, gender, sex or sexual orientation. Contractor agrees to comply with applicable Federal and California laws including, but not limited to, the California Fair Employment and Housing Act beginning with Government Code Section 12900 and Labor Code Section 1735 and OUSD policy. In addition, Contractor agrees to require like compliance by all its subcontractor(s). Contractor agrees to comply with applicable Federal and California laws prohibiting discrimination against students.

13. Assignment of Contractor's Rights

Except as it relates to the hiring of independent contractor drivers, the Contractor shall have no right to assign its rights or obligations under this Agreement, it being understood that this is a personal services agreement.

14. Indemnity of the District

The Contractor hereby agrees to indemnify defend and hold the District, its Board Members, employees, agents, officers and assigns, free and harmless from and against all claims, causes of action, liabilities, damages, expenses and costs (including, but not limited to, attorney fees and court costs) arising out of (a) any injury to any person or property sustained by the District and/or Contractor and/or any student(s), in connection with the provision of the Services, however caused, and (b) any injury to any person or property sustained by any person or entity which is caused or alleged to be caused by any act, neglect, fault or omission on the part of the Contractor in connection with the provisions of the Services, whether or not said injury or damage occurs on or off District property.

15. Independent Contractor

In providing the Services, the Contractor shall be and act as an independent contractor in all respects and shall not, for any purpose hereunder, be or act as an employee or agent of the District. Nothing contained in this Agreement shall be deemed to create a partnership or joint venture between either of the parties to this Agreement with each other. The Contractor understands and agrees that as an independent contractor, it will not be eligible to participate in any benefits or privileges given or extended by the District to its employees. The Contractor shall be solely responsible for the payment when due to appropriate taxing authorities of all federal and state income taxes and related obligations of any nature whatsoever on any consideration paid pursuant to this Agreement, as well as any interest, penalties or other sums due thereon and shall indemnify, defend and hold the District, its Board Members, Officers, employees and agents free and harmless therefrom.

16. Non-Solicitation

District agrees during the term of this Agreement and for a period of twelve (12) months following the termination of this Agreement, District will not, directly or indirectly, or by acting in concert with others, employ, attempt to employ, or solicit for employment, any employee, independent contractor or other person who has performed services for Contractor during the one (1) year period preceding the date of this agreement and thereafter.

17. Notices

All notices or other communication required or permitted hereunder shall be in writing, and shall be personally delivered (including by means of professional messenger service) or sent by registered or certified mail, postage prepaid, return receipt requested, or by facsimile or email transmission followed by delivery of a "hard" copy, and shall be deemed received upon the date of receipt thereof.

To District: Transportation Coordinator
Oakland Unified School District
2850 West Street, Oakland, CA 94608

To Contractor: Friendly Transportation, Inc.
4849 E. 12th Street
Oakland, CA 94601

Notice of change of address shall be given by written notice in the manner detailed in this paragraph

18. Entire Agreement

This Agreement and the attached proposal constitute its entire Agreement between the parties with respect to the provision of the Service and may not be amended except by a writing signed by each of the parties.

19. Waivers

The waiver by either party of a breach or violation of any provisions of this Agreement shall not operate as, or be construed to be, a waiver of any subsequent breach of this Agreement.

20. Severability

In the event any of the provisions, or portions, or portions thereof, of this Agreement is held to be unenforceable or invalid, by any court of competent jurisdiction, the validity and enforceability of the remaining provision or portion of it shall not be affected.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion: The District certifies to the best of its knowledge and belief, that it and its principals: Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or Contractor according to Federal Acquisition Regulation Subpart 9.4, and by signing this contract, verifies that this vendor does not appear on the Excluded Parties List. <https://www.sam.gov/portal/public/SAM>

21. Further Acts

Each party shall perform any further acts and sign and deliver any further documents that are reasonably necessary to carry out the provisions of this Agreement.

22. Counterparts


This Agreement may be signed in one (1) or more counterparts, each of which shall constitute an original but all of which together shall be one (1) and the same document.


IN WITNESS WHEREOF, the parties hereto agreed to be bound and have executed this Agreement.


CONTRACTOR FRIENDLY TRANSPORTATION, INC.

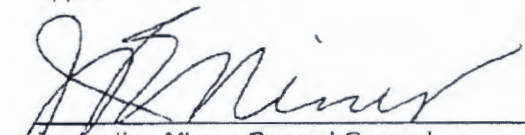
3/10/14
Date

BAIT IT CINH, Inc.
Print Name, Title


President, Board of Education
Oakland Unified School District


Superintendent and Secretary Board of Education
Oakland Unified School District

Approved as to Form


Jacqueline Minor, General Counsel

ATTN

Rosen

ATTN

Rosen



CITY OF OAKLAND

City Administrator's Office

SPECIAL BUSINESS PERMITS

1 Frank H. Ogawa Plaza, 11th Floor

Oakland, CA 94612

Arturo M. Sanchez
Deputy City Administrator

Phone: 510-777-8527
Fax: 510-238-7084

May 22, 2013.

May 22, 2013

RE: New Meter Rate Effective May 22, 2013.

New Meter Rate Effective

Dear Fleet Managers and Drivers:

Dear Fleet Managers and Drivers:

The City Council has passed the following fare structure on May 21, 2013. Below is the new fare structure:

5.64.100 - Fare Structure

Flag drop (excluding mileage)	\$3.20
Mileage	29¢ each 1/10 mile
Waiting Time	\$29.00 per hour
Minimum fare	Greater of \$5.00 or taximeter calculated fare
Oakland Airport fee	Fee set by Oakland Airport
Night surcharge	\$1.00 - Trips commencing after 10 p.m. until 6 a.m.
Small animal (except service animal)	\$1.00
Additional stops requested	\$1.00
Obtaining change	50¢
Luggage that forces trunk open	\$1.00

Please 1) schedule an appointment with Alameda County Weights & Measures to obtain a new meter certificate and 2) update the Fare Structure sign inside the cab. A new meter certificate is required before you start charging the new meter rate. We are anticipating a 60-90 day turnaround.

No taxicabs shall charge the new rate until the meter is adjusted and a new meter certificate has been issued. Failure to obtain a new meter certificate or a new fare structure sign posted inside the cab is a violation of the Oakland Municipal Code.

Thank you for your attention to this matter.

Thank you for your attention to this matter.

Arturo M. Sanchez
Deputy City Administrator

Wheelchairs

\$40.00 Local

\$4 miles outside



CERTIFICATE OF LIABILITY INSURANCE

FRIET-2 OP ID: TV

DATE (MM/DD/YYYY)

02/06/2014

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(ies) must 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 certificate holder in lieu of such endorsement(s).

PRODUCER Placer Insurance Agency License #0C68701 P.O. Box 619052 Roseville, CA 95661-9052 Kendra L. Whitehead		Phone: 916-784-1008 Fax: 916-784-8116	CONTACT NAME: PHONE: (A/C No. Ext): EMAIL: ADDRESS:	FAX (A/C No.):
INSURED Friendly Transportation Inc. 4849 E. 12th Street Oakland, CA 94601		INSURER(S) AFFORDING COVERAGE INSURER A: National Continental Insurance INSURER B: Golden Bear Insurance Co. INSURER C: INSURER D: INSURER E: INSURER F:		NAIC # 10243

COVERAGES		CERTIFICATE NUMBER:		REVISION NUMBER:	
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.					
INSR. LTA	TYPE OF INSURANCE	ADJUSTER INSR. LTA	POLICY NUMBER	EXPIRY DATE (MM/DD/YYYY)	UNITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. <input type="checkbox"/> LOC.				EACH OCCURRENCE DAMAGE TO RENTED EQUIPMENT (See schedule) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMMOD. AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		CP70719824	02/04/2014 02/04/2015	COMBINED SINGLE LIMIT (See schedule) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per occurrence) \$ PROPERTY DAMAGE (Per occurrence) \$ \$
B	UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DCD <input type="checkbox"/> RETENTION \$		GBX29259	02/04/2014 02/04/2015	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in HI) If yes, describe under: DESCRIPTION OF OPERATIONS BELOW:		N/A		WC STATUTORY LIMITS <input type="checkbox"/> CTD EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

VEHICLE SCHEDULE ATTACHED

CERTIFICATE HOLDER OAKLU-1 Oakland Unified School Dist. 1000 Broadway, Suite 398 Oakland, CA 94607	CANCELLATION 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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ACORD 25 (2010/05)

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OP ID: TV

ACORD _{TV} VEHICLE SCHEDULE															DATE 2/6/2014		
PRODUCER PHONE 916-784-1008 Piscer Insurance Agency License #0C86701 P. O. Box 819052 Roseville, CA 95681-9052 Kendra L. Whitehead										APPLICANT Friendly Transportation Inc. EFFECTIVE DATE 02/04/14 EXPIRATION DATE 02/04/15 <input checked="" type="checkbox"/> DIRECT BILL PAYMENT PLAN AUDIT FOR COMPANY USE ONLY							
CODE SUB CODE AGENCY CUSTOMER ID FRIET-2																	
VEHICLE DESCRIPTION																	
VEH #		YEAR		MAKE: Ford		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2000		2000		MODEL: Van		V.I.N. 1FBNE31L7YHA72080		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	
VEH #		YEAR		MAKE: Ford		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2004		2004		MODEL: Van w/Lift		V.I.N. 1FTNS24W04HB52801		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	
VEH #		YEAR		MAKE: Dodge		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2009		2009		MODEL: Van		V.I.N. 2A8HR44E65R656415		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	
VEH #		YEAR		MAKE: Dodge		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2009		2009		MODEL: Van		V.I.N. 2D8HN44E89R547071		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	
VEH #		YEAR		MAKE: Ford		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2007		2007		MODEL: Van		V.I.N. 2FMZA52237BA23504		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	
VEH #		YEAR		MAKE: Chevrolet		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2006		2006		MODEL: Van w/Lift		V.I.N. 1GBDV13L86D238490		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	
VEH #		YEAR		MAKE: Chevy		LIC STATE		TERR		BODY TYPE		SYNAGE		COST NEW			
2006		2006		MODEL: Van		V.I.N. 1GBDY13118D228156		CLASS 4331		SIC		FACTOR		SEAT CP		RADIUS	
CITY, STATE, ZIP WHERE GARAGED		OAKLAND CA 94604		LIC STATE 60		TERR 60		GYW/GCW		CLASS 4331		SIC		FACTOR		SEAT CP	
DRIVE TO WORK/SCHOOL		USE		X COMML		CHECK COVERAGES		ADD'L NO. FAULT		UNDERS MOTOR TOWING & LABOR SPEC C OF L		LSP		DEDUCTIBLES		ACV	
< 15 MILES		PLEASURE		RETAIL		X LIAB NO. FAULT		MED PAY		FT		COMP		AA		ST AMT	
15 MILES +		FARM		SERVICE		X NO. FAULT		UNINS MOTOR		FTW		COLL		S		S	

ACORD 129 (1/88)

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CALIFORNIA INSURANCE IDENTIFICATION CARD**COMPANY NUMBER**

30945

COMPANY NAME AND ADDRESS

Plaza Insurance Company

POLICY NUMBER

PACA1000493-00

EFFECTIVE DATE

3/5/2014

EXPIRATION DATE

5/30/2014

THIS POLICY MEETS THE REQUIREMENTS OF § 16056 OF THE CALIFORNIA VEHICLE CODE**YEAR**

2007

MAKE/MODEL

Toyota

VEHICLE IDENTIFICATION

Cab #69 - VIN #JTDKB20U477592974

AGENCY/COMPANY ISSUING CARD

Public Livery Insurance Services, Inc.

PO Box 80578

San Diego, CA 92138-0578

INSURED

Metro Taxi Cab Company, Inc.

Metro Yellow Cab

4849 E 12th St

Oakland, CA 94601-5107

SEE IMPORTANT NOTICE ON REVERSE SIDE

**THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND****IN CASE OF ACCIDENT:** Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

ACORD 58 CA (2004/07)

© ACORD CORPORATION 2004

ACCIDENT INFORMATION CARDComplete this form with the other parties' information and report the accident to
Plaza Insurance Company 800-510-4474 or fax to 619-593-0857

POLICYHOLDER'S NAME _____

ADDRESS _____

DAYTIME PHONE # _____

INSURANCE AGENT _____

INSURANCE COMPANY _____

INS CO PHONE # _____

POLICY # _____

If an accident happens:

- Stop.
- Help or get help for injured people.
- Warn motorists (use flares, hazard lights).
- Call 911 to contact the police or California Highway Patrol if an injury or death occurs.
- Exchange information with the other driver and complete the Accident Information Card —write down information about the other driver and car, witnesses, passengers, accident location and more.
- Only speak to law enforcement personnel about the accident and do not accept responsibility for the accident regardless of what happened.

After an accident:

- Report the accident to your insurance company.
Plaza Insurance Company 800-510-4474 Report the accident to the Department of Motor Vehicles within 10 days if someone is injured or killed or if damage to either car is more than \$750.
- Make a claim with your insurance company and/or the other driver's insurance company to pay for your injuries and losses.
- Call or see your physician if you have any health concerns.
- Contact your insurance company if you are sued.

CALIFORNIA INSURANCE IDENTIFICATION CARDCOMPANY NUMBER
30945COMPANY NAME AND ADDRESS
Plaza Insurance CompanyPOLICY NUMBER
PACA1000491-00EFFECTIVE DATE
02/07/2014EXPIRATION DATE
5/30/2014**THIS POLICY MEETS THE REQUIREMENTS OF § 16056 OF THE CALIFORNIA VEHICLE CODE**YEAR MAKE/MODEL VEHICLE IDENTIFICATION
2006 Ford CAB #207 - VIN# 2FMA51656BA41005AGENCY/COMPANY ISSUING CARD
Public Livery Insurance Services, Inc.
PO Box 80578
San Diego, CA 92138-0578INSURED
Friendly Cab Company, Inc.
4849 E 12th St
Oakland, CA 94601-5107

SEE IMPORTANT NOTICE ON REVERSE SIDE

**THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND**

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

ACCIDENT 3D CA (2004/07)

© ACCIDENT CORPORATION 2004

ACCIDENT INFORMATION CARDComplete this form with the other parties' information and report the accident to
Plaza Insurance Company 800-510-4474 or fax to 619-593-0857

POLICYHOLDER'S NAME _____

ADDRESS _____

DAYTIME PHONE # _____

INSURANCE AGENT _____

INSURANCE COMPANY _____

INS CO PHONE # _____

POLICY # _____

If an accident happens:

- Stop.
- Help or get help for injured people.
- Warn motorists (use flares, hazard lights).
- Call 911 to contact the police or California Highway Patrol if an injury or death occurs.
- Exchange information with the other driver and complete the Accident Information Card —write down information about the other driver and car, witnesses, passengers, accident location and more.
- Only speak to law enforcement personnel about the accident and do not accept responsibility for the accident regardless of what happened.

After an accident:

- Report the accident to your insurance company.
Plaza Insurance Company 800-510-4474 Report the accident to the Department of Motor Vehicles within 10 days if someone is injured or killed or if damage to either car is more than \$750.
- Make a claim with your insurance company and/or the other driver's insurance company to pay for your injuries and losses.
- Call or see your physician if you have any health concerns.
- Contact your insurance company if you are sued.

CALIFORNIA INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

30945

COMPANY NAME AND ADDRESS

Plaza Insurance Company

POLICY NUMBER

PACA1000493-00

EFFECTIVE DATE

3/5/2014

EXPIRATION DATE

5/30/2014

THIS POLICY MEETS THE REQUIREMENTS OF § 16056 OF THE CALIFORNIA VEHICLE CODE

YEAR

2007

MAKE/MODEL

Toyota

VEHICLE IDENTIFICATION

Cab #77 - VIN #JTDKB20U377570108

AGENCY/COMPANY ISSUING CARD

Public Livary Insurance Services, Inc.

PO Box 80578

San Diego, CA 92138-0578

INSURED

Metro Taxi Cab Company, Inc.

Metro Yellow Cab

4849 E 12th St

Oakland, CA 94601-5107

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

ACORD 98 CA (2004/07)

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ACCIDENT INFORMATION CARD

Complete this form with the other parties' information and report the accident to
Plaza Insurance Company 800-510-4474 or fax to 619-593-0857

POLICYHOLDER'S NAME _____

ADDRESS _____

DAYTIME PHONE # _____

INSURANCE AGENT _____

INSURANCE COMPANY _____

INS CO PHONE # _____

POLICY # _____

If an accident happens:

- Stop.
- Help or get help for injured people.
- Warn motorists (use flares, hazard lights).
- Call 911 to contact the police or California Highway Patrol if an injury or death occurs.
- Exchange information with the other driver and complete the Accident Information Card—write down information about the other driver and car, witnesses, passengers, accident location and more.
- Only speak to law enforcement personnel about the accident and do not accept responsibility for the accident regardless of what happened.

After an accident:

- Report the accident to your insurance company.
Plaza Insurance Company
800-510-4474 Report the accident to the Department of Motor Vehicles within 10 days if someone is injured or killed or if damage to either car is more than \$750.
- Make a claim with your insurance company and/or the other driver's insurance company to pay for your injuries and losses.
- Call or see your physician if you have any health concerns.
- Contact your insurance company if you are sued.