

# Pedicab Operator and Owner-Operator Application Form and Agreement with The London Pedicab Operators' Association (LPOA)

## Registration Details

LPOA operator ID \_\_\_\_\_

Operator Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

Base Address if different: \_\_\_\_\_

Legal Structure:      Limited Company;    Partnership;    Sole-Trader (circle as appropriate)

Company Registration Number: \_\_\_\_\_

Web Address \_\_\_\_\_

Email address (general) \_\_\_\_\_

Landline Tel No \_\_\_\_\_

24 Hour Contact Tel No. \_\_\_\_\_

## Staff Details:

Family Name \_\_\_\_\_

Forenames \_\_\_\_\_

Nationality \_\_\_\_\_

Passport Number \_\_\_\_\_

Landline \_\_\_\_\_

Mobile \_\_\_\_\_

Email \_\_\_\_\_

Position \_\_\_\_\_

## Staff Details:

Family Name \_\_\_\_\_

Forenames \_\_\_\_\_

Nationality \_\_\_\_\_

Passport Number \_\_\_\_\_

Landline \_\_\_\_\_

Mobile \_\_\_\_\_

Email \_\_\_\_\_

Position \_\_\_\_\_

**Staff Details:**

Family Name \_\_\_\_\_  
 Forenames \_\_\_\_\_  
 Nationality \_\_\_\_\_  
 Passport Number \_\_\_\_\_  
 Landline \_\_\_\_\_  
 Mobile \_\_\_\_\_  
 Email \_\_\_\_\_  
 Position \_\_\_\_\_

Above details required for all employees, directors and owners  
 If more please continue on a separate document

# Agreement

**I/We hereby certify that as an Operator or Owner-Operator of Pedicabs in London that I/we will comply with the following Code of Practice:**

**Insurance cover**

I/we hereby certify that I / we have in place 3<sup>rd</sup> Party Public Liability insurance cover, minimum £5M any one event at all times. I/we will ensure that the policy cover note states the number of pedicabs being operated by my organisation (copy of insurance certificate required)

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Cover dates Start \_\_/\_\_/\_\_\_\_ Expire \_\_/\_\_/\_\_\_\_

Number of pedicabs covered \_\_\_\_\_

**Pedicabs**

I/we will only operate pedicabs which are on the LPOA Approved Pedicab List (make / model)

I/we will ensure that pedicabs are at all times clean, presentable and in full working order

The LPOA will issue a Registration Plate which will have a unique reference linked to the Frame Number of each pedicab

Number of Pedicabs \_\_\_\_\_ (schedule attached)

**Maintenance**

I/we confirm that we have a regular Maintenance Programme and that all pedicabs are kept in a clean, safe and roadworthy condition.

**Record Keeping**

I/we confirm that I/we will maintain comprehensive records as follows:

Riders – Rider Registration documents

Training – trainer details

Pedicab Register

Operational – which rider is / was riding which pedicab on any occasion

**Riders**

I/we will ensure that the Rider Code of Conduct is clearly explained to each rider and that each rider who I employ or to whom I rent a pedicab will be Registered with the LPOA Registration Scheme and has signed the Code as agreement that they have understood and will abide by all aspects of the Code

I/we will ensure that riders complete the Safety Checks required by the LPOA before embarking on a shift.

LPOA Photo ID badges for riders will be issued on Registration of each Rider

**Rider Training**

All riders who I engage whether as an employee, contractor or one who rents / leases / rides a pedicab from my organisation will be trained by a trainer accredited by the CTC or other accrediting body, to the National Cycling Standard Level 3

**Disciplinary Procedure**

I/we have the Disciplinary Procedure in place (being developed by the LPOA)

**Reporting information to the LPOA**

I/we will inform the LPOA about any changes in my Registration details including riders and pedicabs.

**General**

I/we confirm that I/we have in place procedures for dealing with the following:

Lost Property

Incidents & accidents

Street monitoring

I/we confirm that I/we will not do or allow my/our riders to do anything that would harm the reputation of the industry

**Data Protection**

I hereby agree that any of the above information may be submitted to the police or the London Authorities by the London Pedicab Operators' Association for prevention of crime and disorder purposes only. All data will remain on the LPOA database indefinitely

**Conditions of LPOA membership**

Annual LPOA membership fees are payable in advance and are non-refundable.

**Undertaking**

I hereby certify that to the best of my knowledge and belief the above information is true and correct

Signature

Name	Position	Date