

APPENDIX E

2019 SHARED MOBILITY SERVICER CERTIFICATION

The undersigned Mobility Share Entity (“Entity”) hereby certifies that all persons under the direction of Entity, performing services or utilized by Entity to perform services for Entity arising from or relating in any manner to Entity’s Shared Mobility Devices deployed or to be deployed in the City of Tucson (collectively, “Persons”), whether independent contractor, common-law employee, statutory employee or statutory nonemployee, are familiar with and have been trained on the following requirements for operation of Shared Mobility Devices in the City of Tucson:

1. Shared Mobility Permit Requirements, including vehicle requirements therein
2. Shared Mobility Pilot Program Rules
3. Chapter 5 of the Tucson City Code, entitled “Bicycles and Shared Mobility Devices”
4. Arizona Revised Statutes § 28-817 “Bicycle Equipment”
5. Entity’s Parking Plan, as determined by the Tucson Department of Transportation

Entity also certifies that all Persons utilized to charge and/or service Entity’s Shared Mobility Devices for deployment in the City of Tucson are qualified and properly trained to test and recognize defects and deficiencies, and service or refer for service, or remove from service, if applicable, if defects or deficiencies are found, in Shared Mobility Device major systems, including, but not limited to:

1. Brakes, both manual and electronic
2. Throttle
3. Charging system and battery
4. Lights
5. Wheels and tires
6. Frame
7. Handlebars

Entity shall instruct all Persons so trained and/or qualified to maintain such systems in good, working order, or, if unable to be maintained in good, working order, to remove Shared Mobility Devices from service.

Entity acknowledges and understands that failure to train and/or qualify the aforementioned Persons after so certifying is cause for immediate suspension and/or termination of Entity’s Permit to operate Shared Mobility Devices within the City of Tucson.

Signed by a duly authorized representative of Entity

Signature:
Name (Printed):
Title:
Date: