

2022 MICROMOBILITY APPLICATION

MICROMOBILITY VEHICLE SHARING OPERATIONS

Thank you for your interest in providing shared micromobility services to Golden Valley. Please complete and submit this application to be considered for participation in the program. The City will review completed applications and chose up to two micromobility service providers. Applicants will be evaluated based on their alignment with the City's strategic priorities, Equity Plan, Comprehensive Plan, and Bike and Pedestrian Plan, as well as their safety record and responsiveness to consumers. Successful applicants will have 10 days to enter into a license agreement with the City. If the license agreement is not signed within 10 days, the approval may be revoked so other applicants may be considered. Where a license is denied, the City will provide an explanation, including the basis for the denial.

Submit applications via email to:

Marc Nevinski, Physical Development Director
mnevinski@goldenvalleymn.gov

Applicant information

Business name	Business phone	Contact person
Mailing address	Physical address	
Email	Website	

Customer service contact

Phone	Text	Email
Other		

Application materials

Please answer the following questions in a separate document. Attach supporting documentations and exhibits as required or appropriate.

1. Experience and qualifications

- a. Describe your qualifications and experience operating a micromobility vehicle sharing operation.
- b. Describe your experience operating a micromobility sharing operation in communities of similar size to Golden Valley or with similar weather patterns.
- c. List the communities in the United States where your company currently operates and the years of operation in those locations.

2. Description of micromobility vehicles

- a. Provide a description of the types of micromobility vehicles you propose to deploy in Golden Valley.
- b. Include images of each type of vehicle described in 3a.
- c. How will each vehicle be uniquely identified?
- d. How many vehicles do you propose to deploy in Golden Valley?
- e. In what proportion or number will each type of vehicle be deployed in Golden Valley?
- f. Will you deploy any ADA accessible vehicles? Yes No

3. Pricing, fees, and compensation

- a. Describe your pricing structure for each type of vehicle proposed to be deployed in Golden Valley.
- b. Describe the payment methods you will use.
- c. How will you accommodate low income, unbanked, or customers who do not use traditional banks or credit or debit cards?

4. Deployment, placement, and service area

- a. Describe your micromobility vehicle deployment strategy for Golden Valley.
- b. Attach a map of the service area showing planned deployment locations.
- c. Describe your schedule for redistribution of micromobility vehicles.
- d. How will vehicles be monitored for compliance with Golden Valley's requirements?
- e. Describe how the City be able to monitor the use, routes, and deployment of vehicles? How?
- f. In what other communities in the Minneapolis-St Paul region do you have or are seeking licenses or agreements to operate?

Application materials**5. Safety: Riding and parking of micromobility vehicles**

- a. Describe how users will be informed of safety, operational, and parking guidelines and requirements.
- b. Describe any incentives, notifications, educational materials, or other methods you will use to promote safe operations and parking requirements.
- c. How will you ensure users operate vehicles safely and comply with state and local requirements?

6. Maintenance

- a. What is your vehicle maintenance plan? How will you know if a vehicle needs maintenance?
- b. How often will electric powered vehicles be recharged?

7. Employment

- a. Describe your staffing plan for servicing Golden Valley?
- b. What proportion of your staff will be contract employees?
- c. Describe your compensation structure for hired and contract employees.
- d. What training will you provide to employees?

8. Community engagement

- a. How will you promote your company in Golden Valley?
- b. How will you engage with Golden Valley residents and businesses?
- c. What community events are you able or willing to participate in?
- d. Include samples of community engagement materials you have used or will use to communicate with the public.
- e. Will you communicate with the public in any language other than English? If so, which languages?

9. Terms of service, user agreements, and privacy policy

- a. Provide any privacy policies, user agreements, and terms of service.
- b. Describe where and how users will view these documents and acknowledge them.
- c. How will you protect your users' privacy?
- d. Is user information shared with other parties? If so, what information is shared?

10. Proof of insurance

- a. Attach a certificate of insurance and endorsements consistent with the City's requirements in the license agreement.

Signature

By signing this application the applicant verifies that all of the information provided herein is true and correct. If issued a license, the applicant agrees to comply with all of the requirements of the City of Golden Valley Micromobility Ordinance and Micromobility Licensing Agreement.

Signature of authorized applicant

X

Name & title (print)

Date

Data Practices Statement**Tennessee Warning**

The data requested in this application will be used to evaluate your application to participate in the City's Micromobility Program (the "Program"). You may choose not to provide some or all of the requested information but failure to provide it may limit your ability to participate in the Program. Data that is classified as public under the Minnesota Government Data Practices Act (the "Act") may be released to the public upon request. Some of the information requested in this application may be considered private data and will only be released to the public in accordance with the Act. By signing below, you are consenting to allow your application and all information therein, whether public or private, to be shared with City staff in order to administer the Program.

Signature of authorized applicant

X

Name & title (print)

Date



This document is available in alternate formats upon a 72-hour request. Please call 763-593-8006 (TTY: 763-593-3968) to make a request. Examples of alternate formats may include large print, electronic Braille, audiocassette, etc.

