

February 11, 2020 – Presented for 1st Reading

1 **2020-5 (1ST READING): GRANTING A FRANCHISE AGREEMENT FOR**
 2 **OPERATION OF RENTAL BUSINESS OF CONVEYANCES REGULATED BY**
 3 **CHAPTER 12, ARTICLE V OF THE CODE OF ORDINANCES OF MYRTLE**
 4 **BEACH TO AUSTIN SHELLEY D/B/A AJAX GOLF CART RENTALS LOCATED**
 5 **AT 1307 NATURE'S WAY, NORTH MYRTLE BEACH, SC 29582, FOR A**
 6 **PERIOD OF ONE YEAR. THE AGREEMENT INCLUDES 24 VEHICLES.**

7 **Applicant/Purpose:** Staff/to regulate the # & location of golf cart & moped rental businesses
 8 by franchising their operations.

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 10 **Brief:**

- 11 • After experiencing several weekends when the # of moped/golf cart rentals & conduct
 12 of the operators became a serious issue, Council imposed a moratorium on increasing
 13 the # of such conveyances.
 - 14 ▪ For 2020 franchisee is requesting 24 golf cart plates, the same # as was
 15 awarded in 2019.
 - 16 ▪ For 2017 the # of mopeds was capped at the # that each company had in
 17 service during the summer of 2016.
 - 18 ▪ For 2017 the # of golf carts was capped at the # each company had in service
 19 for 2016 + the # already ordered at the time the moratorium was imposed.
- 20 • Council also directed staff to work out a permanent solution w/ company owners.
- 21 • Ordinance 2017-56, approved 1/9/18 in consultation w/ the business owners, approved
 22 the framework of a franchise agreement similar to the system in place for taxis.
- 23 • The franchise ordinance requires annual renewals.

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 25 **Issues:**

- 26 • Franchising allows Council to restrict the # of mopeds & golf carts available for rental,
 27 as well as the location of each rental business.
- 28 • Under the franchise terms each conveyance will be issued a City “plate” similar to a
 29 license plate. These plates assist law enforcement to track operational violations.
- 30 • This proposed ordinance:
 - 31 ▪ Sets the location for rental conveyances.
 - 32 ▪ Sets the # of rental conveyances allowed/location.
- 33 • Agreement is for a 1-year period, & must be re-approved annually.

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 35 **Public Notification:** Normal meeting notification

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 37 **Alternatives:**

- 38 • Modify proposed ordinance.
- 39 • Deny ordinance.

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 41 **Financial Impact:** Annual franchise fee of \$10/plate issued.

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 43 **Manager’s Recommendation:** I recommend 1st reading (2/11/2020).

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 45 **Attachment(s):** Ordinance, franchise agreement, & franchise application.

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**CITY OF MYRTLE BEACH
COUNTY OF HORRY
STATE OF SOUTH CAROLINA**

**GRANTING A FRANCHISE AGREEMENT
FOR OPERATION OF RENTAL BUSINESS
OF CONVEYANCES REGULATED BY
CHAPTER 12, ARTICLE V OF THE CODE
OF ORDINANCES OF MYRTLE BEACH TO
AUSTIN SHELLEY D/B/A AJAX GOLF
CART RENTALS LOCATED AT 1307
NATURE’S WAY, NORTH MYRTLE
BEACH, SC 29582, FOR A PERIOD OF
ONE YEAR. THE AGREEMENT INCLUDES
24 VEHICLES.**

WHEREAS, pursuant to the exercise of its police power the City shall require a franchise for the rental and operation of rental conveyances on the highways, streets, alleys and public ways within its police power jurisdiction; and

WHEREAS, the City had determined that the delivery of these services can be provided most effectively and efficiently through the grant of a non-exclusive franchise; and

THEREFORE, PURSUANT TO THE FRANCHISE POWER OF THE CITY OF MYRTLE BEACH, the City of Myrtle Beach grants a Franchise Agreement for Operation of Conveyances to AUSTIN SHELLEY D/B/A AJAX GOLF CART RENTALS, LOCATED AT 1307 NATURE’S WAY, NORTH MYRTLE BEACH, SC 29582, FOR A PERIOD OF ONE YEAR. THE AGREEMENT INCLUDES 24 VEHICLES.

This ordinance shall take effect immediately upon adoption.

BRENDA BETHUNE, MAYOR

ATTEST:

JENNIFER STANFORD, CITY CLERK

First reading: 2-11-2020
Second reading:

**APPLICATION
FOR
FRANCHISE TO RENT CONVEYANCES REGULATED BY CHAPTER 12,
ARTICLE V, WITHIN THE CITY OF MYRTLE BEACH**

Pursuant to the exercise of its police power the City shall require a franchise for the rental and operation of rental conveyances on the highways, streets, alleys and public ways within its police power jurisdiction and the City has determined that the delivery of these services can be provided most effectively and efficiently through the grant of a non-exclusive franchise. Applications shall be made by completing this form. All sections of this form must be completely filled out and supporting documentation attached. An incomplete application will not be processed and will be returned to the applicant. The provision of false, misleading or incomplete information shall be grounds for denial or revocation of a Franchise.

APPLICANT INFORMATION

Owner's Name: Austin Shelley Telephone: 843-274-0562
Residence Address: 1803 Hwy 57 N, Little River, SC 29582
Business Address: 1307 Nature's Way, North Myrtle Beach, SC 29582
Driver's License No.: 011200127 State: SC Expiration Date: 8-21-2024

Persons managing, supervising or conducting business for the owner:

1. Name: _____ Telephone: _____
Residence Address: _____
Driver's License No.: _____ State: _____ Expiration Date: _____
Position/Title: _____

2. Name: _____ Telephone: _____
Residence Address: _____
Driver's License No.: _____ State: _____ Expiration Date: _____
Position/Title: _____

3. Name: _____ Telephone: _____
Residence Address: _____
Driver's License No.: _____ State: _____ Expiration Date: _____
Position/Title: _____

BUSINESS INFORMATION

Business Name: A-JAX Golf Cart Rentals Trade Name: _____
Business Address: 1307 Nature's Way, North Myrtle Beach, SC 29582
Business Telephone: 843-421-1006
City of Myrtle Beach Business License No.: 28381 Issued Date: 6-1-19

Type of Business (Check One): Sole-Proprietor Partnership Corporation

Provide the following for ALL owners/partners/corporate officers as applicable:

Name: Austin Shelley D.L. no.: 011200127 State: SC Name:
_____ D.L. no.: _____ State: _____

Attach all relevant documents showing the legal formation of the partnership or corporation in the State of South Carolina

Provide a description of the financial condition of your company including assets and liabilities (attach documentation):

We have been in business for 12 years.

Has any applicant, owner, partner, officer or any other individual with an interest in the business ever been convicted or entered a plea of guilty or no contest to any crime classified as a felony, misdemeanor or traffic violation? YES ___ NO X

If yes, then please describe below (attach additional sheets if necessary):

Name: _____ Charge: _____ Date: _____
Location: _____ Disposition: _____
Name: _____ Charge: _____ Date: _____
Location: _____ Disposition: _____
Name: _____ Charge: _____ Date: _____
Location: _____ Disposition: _____
Name: _____ Charge: _____ Date: _____
Location: _____ Disposition: _____

The failure of any individual with an interest in this application to fully disclose requested criminal/traffic history information shall be grounds for the City's denial fo the request. Please attach a criminal history report and a 10-year driving history for every individual who has an interest in the proposed business.

Type of service: Year Round: Days of the week: Year Round (seven days a week) 9AM-5PM
Hours: _____
(describe service schedule): We stop deliveries at 3PM.

Will the applicant provide the insurance required for all authorized units: Yes _____

Issuing Insurance Company: Burlington Insurance Company
Policy Number (if available): 861BW44874
Limits of Liability: Per Person: _____ Per Occurrence: \$1,000,000
Property Damage: General Liability


If "No", explain how the applicant will ensure that each unit will comply with the insurance requirements set forth in the City Code of Ordinances.

Applicants authorized under state law to operate as Self-Insured should attach a copy of such authorization to this application.

Explain why you believe that public convenience and necessity requires the granting of this application (attach statistical data and additional sheets as necessary):
We rent to many families who are vacationing in Myrtle Beach and are not staying at oceanfront property.
They use the golf cart to transport themselves and their beach gear, such as chairs and toys, to the beach rather than driving in their car. People like the convenience of keeping the sand out of the car and the ease of parking the smaller vehicle.

I certify that all of the information contained in this application is true and complete to the best of my knowledge. I further certify that I have read and understand the City of Myrtle Beach Regulations for Operation of Moped and Golf Cart Rental Companies and the City of Myrtle Beach Regulations for Operators of ATV's, Mopeds, Golf Carts, LSV's and Scooters, attached hereto.

Applicants Name (printed): Austin Shelley

Applicants Signature:  Date: 1-15-2020

Attachments: (check those that apply)

- Receipt for payment of application fee*
- List of additional owner, partners or corporate officers
- Documents that prove the legal formation of the partnership or corporation
- Documents outlining current financial condition
- Additional sheets to document crimes
- Criminal History report for every individual having an interest in the business*
- 10-year driving history for every individual having an interest in the business*
- Vehicle registration(s)
- Photographs or drawings of proposed color scheme*
- Authorization to Self-Insure
- Additional documentation regarding public necessity, including statistical data

* denotes attachments required to process this application



UNOFFICIAL 10 YEAR DRIVER RECORD (Web)

Customer No: 25502513 Driver License No: 11200127
 Name: SHELLEY, AUSTIN PAUL
 Address: 1803 HIGHWAY 57 N
 City: LITTLE RIVER State: SC Zip: 295667034
 County: HORRY Sex: M Driver Training: N
 DOB: 08/21/1983
 Status - DL: NO SUSPENSION CDL: NO DISQUALIFICATION

License Information

Type	Class	Function	Issued	Expires	First Issued	Restr.	Endor.	Document Identifier (ACN / DDN)
Current								
DL	D	Renewal	08/22/2014	08/21/2024	04/09/1999	N	N	1011329700006633
Prior								
DL	D	Renewal	08/09/2004	08/21/2014	04/09/1999	N	N	N/A
DL	D	Reissue	08/09/2004	08/21/2014	04/09/1999	N	N	N/A
DL	D	Reissue	08/09/2004	08/21/2014	04/09/1999	N	N	N/A
DL	D	Duplicate	08/28/2006	08/21/2014	04/09/1999	N	N	N/A
DL	D	Modify	04/16/2012	08/21/2014	04/09/1999	N	N	1011131200020379
DL	D	Modify	04/22/2008	08/21/2014	04/09/1999	N	N	N/A
DL	D	Modify	05/18/2009	08/21/2014	04/09/1999	N	N	N/A
DL	D	BP to DL	04/09/1999	08/21/2004	04/09/1999	N	N	N/A

Address Change -

Address: 1100 DAVID ST APT 1211
 City: NORTH MYRTLE BEACH State: SC Zip: 295827600

Date Changed: 04/16/2012

Point Summary

Total Current Points: 0
 Driver Credit: -0
 Adjusted Current Points: 0

ACC: REPORTABLE

Accident: 03/15/2019

Accident Case Number: 19533379

Accident Jurisdiction: SC Acc Loc Ref: SCHDPT

Contributed: Y

Posted: 03/20/2019

FR-10 Audit Number: W-393102

End of Report



SLED CATCH
Citizens Access to Criminal Histories

NO ARREST DATA
IN ACCORDANCE WITH
SEARCH CRITERIA SUBMITTED
S.C. Law Enforcement Division
WWW

Results

Name **AUSTIN SHELLEY**
DOB **1983 08 21**
Gender **Male**
Maiden Name
SSN *******4131**
Transaction **11513434RT**
Date of Check **January 15, 2020 at 13:43**

To Whom it May Concern:

The criminal history search was based upon the criteria furnished. It did not include a fingerprint comparison, which is the only means of positive identification. This **NO ARREST DATA** verification is only valid as of January 15, 2020 at 13:43 since a record may be established after that time. Therefore, if no action is taken within a reasonable period, it is recommended that another check be made.

Sincerely,

Chief Mark Keel
South Carolina Law Enforcement Division

A-JAX Golf Carts 2020

(Requesting 24 decals)

Serial Numbers

1. AG1320-367984 white
2. 2793707 white
3. 2778051 red
4. 2795619 green
5. 2753801 green
6. 2816308 white
7. 2517176 orange
8. PH1402-432502 black
9. PH1403-433255 black
10. PH1403-433239 black
11. PH1403-433410 black
12. PH1402-432453 black
13. PH1402-432539 black
14. PH1403-433241 black
15. PH1403-433418 black
16. PH1402-432452 black
17. PH1402-432487 black
18. 2806099 blue
19. PD1323-376332 black
20. PQ0433-422091 yellow
21. 2617360 blue
22. 2752849 red
23. PQ0738-818832 red
24. JE1422-466943 white



AJAXG-1

OP ID: NAR

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/28/2020

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 have ADDITIONAL INSURED provisions or 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 Strovis Insurance- Georgetown Corporate Office 1309 Highmarket Street Georgetown, SC 29440 Naomi Aranda	843-436-2106	CONTACT NAME: Naomi Aranda PHONE (A/C, No, Ext): 843-436-2106 E-MAIL ADDRESS: naomi.aranda@strovis.com	FAX (A/C, No): 843-546-1638
INSURED Ajax Golf Cart Rental Austin P Shelley 730 Main Street, Box 247 North Myrtle Beach, SC 29582		INSURER(S) AFFORDING COVERAGE INSURER A: Burlington Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

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 LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER	X	861BW44874	04/16/2019	04/16/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea.occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ included
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		861BW44874	04/16/2019	04/16/2020	COMBINED SINGLE LIMIT (Ea. accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER City of Myrtle Beach PO Box 2468 Myrtle Beach, SC 29528	CITY OF M	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 Naomi Aranda
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
<p>City of Myrtle Beach PO Box 2468 Myrtle Beach SC 29528</p>	
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.