



CID. No. \_\_\_\_\_

Fee: \_\_\_\_\_

Expires: 6/30/\_\_\_\_\_

### COMMERCIAL IDENTIFICATION ("CID") CARD APPLICATION

Permission is requested to conduct business within the boundaries of the Ventura Port District by:

Name of Person \_\_\_\_\_ M  F

Name of Company \_\_\_\_\_  
(DBA, Partnership, Corporation)

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_ Residence Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Driver's License No. \_\_\_\_\_ City Business License No. \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Birth date \_\_\_\_\_

Describe Commercial Activity to be Performed: \_\_\_\_\_

Subject to the following conditions/requirements:

- A. CID card is for purposes of identification only, and is not intended to grant permission to any cardholder to enter onto any specific leasehold within the Ventura Harbor to perform commercial activity, and must be renewed annually expiring on June 30th of each year.
- B. CID card application shall be submitted in person to Ventura Port District staff at 1603 Anchors Way Drive, Ventura, CA 93001, with all required conditions and photos attached.
- C. Business owner **Employee CID cards** may be obtained by submitting the fully completed, filled out by each employee in person, "Additional Employees Attachment" form, and each employee must present his/her photo I.D. in person to Ventura Port District staff.
- D. **CID card recipient shall carry the CID Card on his/her person at all times while engaged in permitted activity** and shall display same to any law enforcement official upon demand.
- E. **CID card recipient agrees** to surrender said CID Card upon expiration (June 30<sup>th</sup> of each year) or cancellation for violation, misstatement, incorrect information or non-compliance of the terms and conditions set forth by the Ventura Port District.

F. FEE FOR VENDORS RENEWING THEIR CARD AS OF JULY 1ST: Payment of One Hundred and Fifty dollars **(\$150.00)** for business owner, and twenty dollars **(\$20.00)** for each employee in the form of cash or check.

FEES IF APPLYING THROUGHOUT THE YEAR: 1<sup>st</sup> Qtr (July-Sept) = **\$150** / 2<sup>nd</sup> Qtr (Oct-Dec) = **\$125** / 3<sup>rd</sup> Qtr (Jan-Mar) = **\$75** / 4<sup>th</sup> Qtr (Apr-June) = **\$50**, and twenty dollars **(\$20.00)** for each employee in the form of cash or check still applies.

G. Submittal of two (2) recent professional quality, 1½ x 1 inches (passport photo size) color (preferred) photographs for each applicant that show front view of applicant's face and shoulders.

H. Evidence of a current business license from the City of San Buenaventura is required.

I. **Evidence of insurance coverage in the form of a Certificate of Insurance naming the Ventura Port District as certificate holder and an additional insured** and providing that the policy of insurance shall not be canceled without first giving the Ventura Port District written notice of 10 days. **Additionally, evidence of the additional insured endorsement in the form of an endorsement page naming the Ventura Port District as an additional insured must be submitted with the certificate.** The policy shall have the following minimum limits of insurance:

1. Commercial General Liability "occurrence" coverage in the amount of \$500,000 combined single limit (CSL) bodily injury and property damage for each occurrence.

J. **Evidence of Worker's Compensation coverage if the business has employees** per statutory requirements, and providing that the policy of insurance shall not be canceled without first giving the Ventura Port District written notice of 10 days.

K. **Hold Harmless.** The CID Card Recipient shall save harmless and indemnify, and, at the VENTURA PORT DISTRICT'S (the "District") request, defend the DISTRICT, its officers, officials, employees, agents, representatives, and volunteers from and against any and all claims, demands, actions, damages, expenses, suits, accidents, injuries, liability, or proceedings of any character whatever (including without limitation, attorney's fees), in law or in equity, including, but not limited to, injury to or death of any person, and damages to or destruction of property, brought for or on account of, or resulting from or arising out of or in connection with, any act, error or omission, negligence, wrongful conduct, or other action or activity by the CID Card Recipient or any of the CID Card Recipient's officers, agents, employees, representatives, subconsultants, or subcontractors.

L. Assurance that all commercial or business activity will not pose a navigational hazard within the harbor, will not impede the free circulation of vessels, vehicles or persons within the harbor, and will not adversely affect any type of traffic within the harbor.

M. Assurance that commercial or business activity will not cause pollution of the harbor waters or littering of the docks, wharves, walkways, or adjacent land areas within the harbor.

N. Compliance with any further requirements as deemed appropriate and in the public interest by the Board of Port Commissioners.

I have read understand the Ventura Port District application requirements and agree to comply with those conditions:

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Ventura Port District Date

*Commercial Identification Cards  
Additional Employees Attachment*

Permission is requested to conduct business within the boundaries of the Ventura Port District by:

Name of Person \_\_\_\_\_ M  F  (photo)

Driver's License No. \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Birth date \_\_\_\_\_

Permission is requested to conduct business within the boundaries of the Ventura Port District by:

Name of Person \_\_\_\_\_ M  F  (photo)

Driver's License No. \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Birth date \_\_\_\_\_

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Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Birth date \_\_\_\_\_



POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

**Ventura Port District  
1603 Anchors Way Drive  
Ventura, California 93003**

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

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