

# **Application for Additional Permits**

for Taxicab, Limousine, Van, and Handicab Services

|                    | Staff Use Only |  |
|--------------------|----------------|--|
| Company Name:      |                |  |
| Type of Service: _ |                |  |
| Date Received:     |                |  |
| Certificate No:    |                |  |
|                    |                |  |

2814 E. Hillsborough Ave., Tampa, Florida 33610 • 813-635-5200 • www.hillstax.org

### **Application for Permits**

| Indicate the type of service and the number of additional vehicle permits you are requesting.   |
|---|
| Check here if requesting Temporary Permits for a Special Event  |
| Business Name:  |
| Number of Standard Taxicab permits requested  |
| Number of Luxury Taxicab permits requested  |
| Number of Limousine (Stretch/Sedan/SUV) permits requested   |
| Number of Van permits requested   |
| Number of Handicab permits requested  |
|   |
| Initial here if this application is to include a Port Tampa Bay decal.  |
| <b>Note:</b> All vehicles for hire, providing for hire transportation services on property belonging to the Tampa Port Authority, must name the Tampa Port Authority as an additional insured/Certificate Holder on its motor vehicle liability insurance policy (Accord Form). |

## **Application for Permits**

| Name of Business:                  |                       |                |      |   |
|------------------------------------|-----------------------|----------------|------|---|
| Physical address where business is |                       |                |      |   |
| City:                              |                       | State:         | ZIP: | _ |
| Phone:                             |                       |                |      |   |
| E-mail:                            |                       |                |      |   |
| Business Mailing Address (comple   | ete only if different | t from above): |      |   |
|                                    |                       |                |      |   |
|                                    |                       |                |      |   |
|                                    |                       |                |      |   |
| Owner's Full Name:                 |                       |                |      |   |
| Owner's Street Address:            |                       |                |      |   |
| City: State:                       |                       |                |      |   |
| Phone:                             |                       |                |      |   |
| Email Address:                     |                       |                |      |   |
|                                    |                       |                |      |   |
|                                    |                       |                |      |   |
| Manager's Full Name:               |                       |                |      |   |
| Manager's Local Street Address:    |                       |                |      |   |
| City:                              |                       | State:         | ZIP: | - |
| Phone:                             |                       |                |      |   |
| Email Address:                     |                       |                |      |   |

#### **Application for Permits**

#### **REQUIRED Documents Checklist:**

Attachment 1: The business must identify & list all vehicles utilized by the business. The list shall include the year, make, model and Vehicle Identification Number (VIN) on the prescribed form.

Attachment 2: Liability insurance for each vehicle (Accord Form).

Note: All vehicles providing transportation services on property belonging to the Tampa Port Authority, must name the Tampa Port Authority as an additional insured/Certificate Holder on said motor vehicle liability insurance policy (Accord Form).

Attachment 3: Vehicle Registration for each vehicle.

Attachment 4: An ASE Certification (Mechanical Inspection) form for each vehicle. Each vehicle must be inspected and certified safe by an ASE (Automotive Service Excellence) certified mechanic or commercial auto repair facility licensed by the State of Florida.

Attachment 5: Acknowledgment of Ordinance and Compliance Affidavit.



#### **List of Vehicles Form**

Identify and list all vehicles used by the business. The list shall include the year, make, model and Vehicle Identification Number (VIN). All vehicles must obtain a permit.

| iness Name: |      |       | Vehicle Identificati |
|-------------|------|-------|----------------------|
| Year        | Make | Model | Number (VIN)         |
|             |      |       |                      |
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Chapter 10, Article XVI of the Hillsborough County Code of Ordinances and Laws, Ordinance 17-22, Section 7. B (7)

#### Additional Permit Application for Limousines, Vans, and Handicabs Acknowledgement of Ordinance and Compliance Affidavit

#### Acknowledgement of Ordinance For Regulation of Vehicles for Hire

Applicant's Initials \_\_\_\_\_

The Ordinance details important information about the rules and regulation of Vehicles for Hire, including Limousines, Vans, and Handicabs.

I understand that it is my responsibility to read, understand and comply with the Ordinance, Resolution, and any revisions made. I have read and understand the Ordinance, its requirements and the penalties imposed as defined.

| Vehicle for Hire Permit Application Compliance Affidavit |   |  |  |  |
|--|---|--|--|--|
|  |   |  |  |  |
|  |   |  |  |  |
| (Individual or Representative)                           |   |  |  |  |
| of   |   |  |  |  |
| (Company or Corporation)                                 |   |  |  |  |
| municipal ordinances and codes; state laws, regulat      | mpany is in compliance with all applicable county and cions and codes; and federal laws and codes.  d the foregoing document and the facts stated in it are |  |  |  |
| true.  | d the foregoing document and the facts stated in it are   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |
| Applicant's Signature                                    | Date:   |  |  |  |
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