

JACKSONVILLE AVIATION AUTHORITY
JACKSONVILLE INTERNATIONAL AIRPORT
COMMERCIAL GROUND TRANSPORTATION OPERATORS
PERMIT APPLICATION
OCTOBER 1, 2016 – SEPTEMBER 30, 2017



PERMIT APPLICATION DEADLINE DUE BY: SEPTEMBER 22, 2016

Please read all of the items listed below.
Follow all instructions and provide all documents or information requested.

New Permit Application Renewal Permit Application Type of Permit _____

1. COMPANY DATA:

Name of Company: _____

d.b.a. Name (If applicable): _____

Business Address: _____

(Must be Physical address
NO P.O. BOX):

Mailing/Billing Address same as above: Yes No

If No, Please Indicate Mailing/Billing Address:

Owner's or Registered Agent (President/Vice President) _____

List Other Owners, Officers, Partners: _____

Manager's Name: _____

Business Telephone: _____ Cell Phone: _____

Fax #: _____

Email Address: _____

Note: The Permit Holder shall be responsible for providing immediate written notice to the Authority for any and all company and vehicle changes. The written notice shall be delivered by fax, email or hand delivered to the Parking Office.

2. **APPLICATION FEE:** For new or renewal Permit, or for any ownership change of an existing Permit, there will be a non-refundable application fee of \$50.00. Make checks payable to the "Jacksonville Aviation Authority" (JAA).
3. **VEHICLE INFORMATION:**
 - A. Provide the information requested on the attached "Vehicle Schedule" form for each vehicle for which you desire a permit and AVI. Complete additional forms, as required. Information must also be provided in writing each time a vehicle is added or deleted from the fleet;
 - B. Provide (deliver, fax or mail) a copy of the current vehicle registration for EACH VEHICLE listed on your attached schedule;
 - C. Vehicle **MUST** be registered under the company name listed above as a commercial vehicle; or
 - D. If vehicle is leased, attach a copy of the leasing agreement (contract or notarized document required) for each leased vehicle including the term of the lease;
 - E. Permit Holder must provide evidence the vehicle is registered with the City of Jacksonville for Hire Office, if applicable.
4. **INSURANCE:** Provide a copy of the Certificate of Insurance covering every vehicle described in your vehicle schedule that meets the following requirements:
 - A. Unless "Any Auto" is specified, a schedule (year, make, entire VIN) of each vehicle covered by the policy must accompany the Certificate of Insurance;
 - B. Minimum coverage for each vehicle shall be \$125,000/\$300,000/\$50,000;
 - C. The company name, as listed above, must be stated on the Certificate of Insurance, as well as, the policy number;
 - D. The Jacksonville Aviation Authority must be listed as additionally insured on the Certificate of Insurance;
 - E. Each insurance policy shall provide that it may not be canceled until the expiration of thirty (30) days after the notice of its intended cancellation has been given in writing to the Authority by registered mail or personal delivery.
5. **GOOD STANDING:** If the Permit Holder is a corporation or limited partnership, the Authority will verify a certificate evidencing that the Permit Holder is either a Florida corporation or limited partnership in good standing in the State of Florida or is a foreign corporation or limited partnership authorized to transact business in the State of Florida.
6. **FICTITIOUS NAME:** If the Permit Holder (including a sole proprietorship) operates under a fictitious name, the Authority will verify the Permit Holder's fictitious name registration with the State of Florida.
7. **SECURITY DEPOSIT:** The Permit Holder must be in full compliance with the security deposit required by the Commercial Ground Transportation Policy. In the event of the sale or transfer of a company who is a Permit Holder, the exact security deposit amount on file with the Jacksonville Aviation Authority must be listed in the contract for such sale or ownership transfer and will include legal verbiage that specifies the person(s) or company that will retain ownership of the security deposit. Further, the new Permit holder or company owner(s) must provide the security deposit specified in the Authority's Commercial Ground Transportation Policy to the Jacksonville Aviation Authority prior to being authorized to operate as a valid Permit holder.

- 8. AFFIXING PERMIT DECALS AND AVI:** Permit decals issued pursuant to this application are to be affixed to vehicles on the inside lower corner of the windshield on the driver side. AVI's sticker may be applied inside below the rear view mirror or inside upper corner on the passenger side. Permit decals and AVI stickers are assigned to a specific vehicle and are non-transferable. Contact the Parking Office for additional or replacement permit decals or AVI stickers.
- 9. IDENTIFICATION OF PERMIT HOLDER ON VEHICLE:** All vehicles must display identification of the name or the fictitious name registered with the State of Florida of the Permit Holder on the exterior side of the vehicle or on the front license plate of the commercial vehicle. In the case of a Vehicle displaying the name of another Operator or Permit Holder that contracted transportation services from the Permit Holder, the name, or the fictitious name registered with the State of Florida, of the permit Holder of the Vehicle providing transportation must be displayed on the Vehicle dashboard, adjacent to the Permit Decal, and must be visible from the outside the Vehicle.
- 10. PAYMENT OF FEES:** No Permit holder may operate at the Airport unless the Permit holder has timely paid all applicable fees. A non-refundable fee will be charged for non-sufficient fund checks and Permit Holder will be immediately placed on suspension until all applicable fees, late fees, and penalties are paid in full.
- 11. The mailing address of the Authority is:**

Jacksonville Aviation Authority
Business Development Department
14201 Pecan Park Road
Jacksonville, FL 32218

NOTE: Failure to complete the permit process prior to the due date of (SEPTEMBER 22, 2016) will result in a non-refundable late fee of \$50.00.

Complete the attached "Statement of Receipt, Acknowledgement and Understanding of the Ground Transportation Rules & Regulations."

The above named company, its representatives and the employees agree to operate within the guidelines of the Rules and Regulations at Jacksonville International Airport, Jacksonville, Florida, as established and adopted by the Jacksonville Aviation Authority Board on or as thereafter amended. As the authorized representative of the permitted ground transportation company listed below, I acknowledge that I have a responsibility to obtain the latest version of the Commercial Ground Transportation Rules and Regulations at Jacksonville International Airport. I certify that I have received a copy of the above referenced Commercial Ground Transportation Rules and Regulations and I understand it is the Permit Holder's responsibility to inform all current and future employees of these Rules and Regulations. Furthermore, as the authorized representative, I acknowledge that the below listed ground transportation company (Permit Holder) is responsible for the actions of its drivers, employees, affiliates or any other person provided or attempting to provide ground transportation service.

I understand any violations of the Commercial Ground Transportation Rules and Regulations, or the contractual obligations contained in the agreement, may result in financial penalties and/or in the suspension and/or revocation of my company's operating privileges at Jacksonville International Airport.

Further, I understand it is my obligation to pay all fees, late fees, financial penalties, interest and security deposit requirements as required in the Commercial Ground Transportation Rules and Regulations. I acknowledge failure to fulfill financial obligations will result in the suspension of operating privileges for my company.

I certify that all information provided on this application is true and correct.

Company Name

Printed Name of Permit Holder

Signature of Permit Holder

Date

Printed Name of Authorized Representative

Title

Signature of Authorized Representative

Date

