



Doug Belden, Tax Collector

## Certificate and Permit Application for Limousines, Vans, and Handicabs

**Staff Use Only**

Company Name \_\_\_\_\_

Company Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

Permits Assigned: \_\_\_\_\_

2814 E. Hillsborough Avenue, Tampa, Florida 33610 • 813-635-5200 • [www.hillstax.org](http://www.hillstax.org)



Doug Belden, Tax Collector

**Vehicle for Hire Certificate and Permit Application**

for Limousine, Van, and Handicab Services

Indicate the type of service and the number of vehicle permits to perform this service.

Business Name: \_\_\_\_\_

\_\_\_\_\_ 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.

**Note:** 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 on its motor vehicle liability insurance policy (Acord Form).

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

**Vehicle for Hire Certificate and Permit Application**  
for Limousine, Van, and Handicab Services

Name of Business: \_\_\_\_\_

Physical address where business is operated: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone : \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Business Mailing Address (complete only if different from above):

\_\_\_\_\_  
\_\_\_\_\_

Owner's Full Name: \_\_\_\_\_

Owner's Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Manager's Full Name: \_\_\_\_\_

Manager's Local Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

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

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

**Vehicle for Hire Certificate and Permit Application**  
for Limousine, Van, and Handicab Services

**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. This is a new BOCC requirement.

Attachment 2: Liability insurance for each vehicle (Acord 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 on said motor vehicle liability insurance policy.

Attachment 3: Vehicle Registration for each vehicle.

Attachment 4: An ASE Certification 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. (Mechanical Inspection Form HCTC Rev 12/19)

Attachment 5: The business must identify & list all drivers utilized by the business. The list shall include the name, address, date of birth and phone number for each driver on the prescribed form.

*Note: All drivers must be issued a public vehicle driver's license to operate any Vehicle for Hire.*

Attachment 6: Copy of current Business Tax Receipt.

Attachment 7: Articles of Organization, FL Profit Corporation, or Limited Partnership, registered with the Division of Corporations at Sunbiz.org. Include fictitious name registration when applicable.

Attachment 8: Acknowledgement of Ordinance and Compliance Affidavit





