



Interoffice Memorandum

AGENDA ITEM

APPROVED BY ORANGE
COUNTY BOARD OF COUNTY
COMMISSIONERS

BCC Mtg. Date: Jun. 14, 2016

May 25, 2016

TO: Mayor Teresa Jacobs
-AND-
Board of County Commissioners

FROM: Christopher Hunter, M.D., Ph.D., Director
Health Services Department
Contact: 407-836-7611

A handwritten signature in black ink, appearing to read "CH", positioned to the right of the "FROM" field.

SUBJECT: Paratransit Service License
Advance Care Transportation
Consent Agenda – June 14, 2016

The EMS Office of the Medical Director requests the approval and execution of the renewal Paratransit Services License for Advance Care Transportation. Advance Care Transportation has submitted the attached application requesting approval of a Paratransit Services License to provide wheelchair/stretchers service within Orange County.

The EMS Office of the Medical Director has determined that all requirements have been met by Advance Care Transportation as contained in Orange County Ordinance 2001-09.

ACTION REQUESTED: Approval and execution of the renewal Paratransit Services License for Advance Care Transportation to provide wheelchair/stretchers service. The term of this License is from June 30, 2016 through June 30, 2018. There is no cost to the County. **(EMS Office of the Medical Director)**

CH/cf

Attachments

Cc: George A. Ralls, M.D., Deputy County Administrator



RENEWAL PARATRANSIT SERVICES:

APPLICATION FOR LICENSE

APPLICATION DATE: 5/23/16

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: Advance Care Transportation

2. BUSINESS ADDRESS (INCLUDE COUNTY):

13132 Paloma Drive Orlando FL 32837
Orange County

3. CONTACT INFORMATION: Name Ali Abed / YAMBA Abed

Business Phone 407 -883 - 9414

Mobile Phone 973, 461 - 6075

Email AdvanceCareTrans@gmail.com

4. OWNERSHIP TYPE: PRIVATE CORPORATION GOVERNMENT AGENCY OTHER

a. If other, please describe: _____

5. LEVEL OF SERVICE: WHEELCHAIR STRETCHER BOTH

6. PROOF OF CURRENT INSURANCE SUBMITTED TO EMS OFFICE:

YES, DATE: 5/23/16

NO

SECTION II: VEHICLES AND STAFFING

1. NUMBER OF VEHICLES IN OPERATION: 8

2. EMPLOYEE ROSTER:

<u>NAME</u>	<u>FDL NUMBER</u>	<u>CURRENT CPR CARD (Y/N)</u>
Yama ABED	Driver's License Numbers are confidential pursuant to Federal Driver's Privacy Protection Act- 18 U.S.C. ss. 2721 et seq	Y
Ali ABED		Y
Genaro A Baez		Y
Nayda I Santana Rodriguez		Y
Shaddan Hossain		Y
Rubaba Waezzade		Y
Hakima Kibini		Y

I, the undersigned representative of the service named in this application, do hereby attest the information provided in this application is truthful and honest to the best of my knowledge, and that my service meets all of the requirements for operation of a paratransit services in Orange County and the State of Florida. I acknowledge that as provided in Orange County Code of Ordinances Chapter 20, Division 3, Section 20-137, licenses obtained by an application in which any material fact was intentionally omitted or falsely stated are subject to revocation.

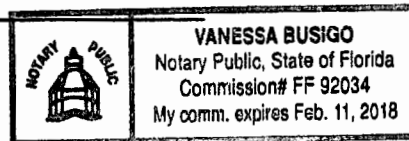
Yama Abed
SIGNATURE OF APPLICANT OR REPRESENTATIVE

5/24/16
DATE:

NOTARY SEAL

NOTARY SIGNATURE

[Handwritten Signature]



License Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that ADVANCE CARE TRANSPORTATION
has complied with the Orange County Code 2001-9 and Rules and Regulations
established by the Board of County Commissioners and is authorized to operate a Paratransit Service
in Orange County.

Date of Issue: June 30, 2016

Date of Expiration: June 30, 2018

40-18(7/14)

[Signature]

Mayor, Board of County Commissioners

