



Interoffice Memorandum

AGENDA ITEM

March 4, 2021

TO: Mayor Jerry L. Demings
-AND-
County Commissioners

THRU: Yolanda G. Martinez, EdPhD., PhD., Director
Health Services Department

FROM: Christian C. Zuver, M.D., Medical Director
EMS Office of the Medical Director
Contact: (407) 836-7611

SUBJECT: Paratransit Services License
Promotion Transportation Services
Consent Agenda – March 23, 2021

A handwritten signature in black ink, appearing to be "Yolanda G. Martinez", written over the "THRU" line of the memorandum.

The EMS Office of the Medical Director requests approval and execution of the Paratransit Services License for Promotion Transportation Services. Promotion Transportation Services 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 Promotion Transportation Services as contained in Orange County Ordinance 2001-09. The public notice has been posted for this request and no objection has been received.

ACTION REQUESTED: Approval and execution of the Paratransit Services License for Promotion Transportation Services to provide wheelchair/stretchers service. The term of this license is from April 1, 2021 through April 1, 2023. There is no cost to the County. **(EMS Office of the Medical Director)**

CCZ/cf

Attachments



PARATRANSIT SERVICES:
APPLICATION FOR LICENSE

APPLICATION DATE: Jan 10 2021

PROPOSED DATE OPERATIONS WILL BEGIN: Jan 11 2021

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: Promotion Transportation Soc, Inc.

2. BUSINESS ADDRESS (INCLUDE COUNTY):

4941 Wansley Dr Orlando, FL 32812
ORANGE

3. CONTACT INFORMATION: Business Phone 407-306-0366

Mobile Phone 407-298-7403

Email Province365@bellsouth.net

4. OWNERSHIP TYPE: PRIVATE CORPORATION GOVERNMENT AGENCY OTHER

a. If other, please describe: _____

5. CORPORATE OFFICERS AND DIRECTORS:

<u>NAME</u>	<u>ADDRESS</u>	<u>POSITION</u>
<u>Tom Province</u>	<u>4941 Wansley Dr. OrL, FL</u>	<u>President</u>
<u>Sarah Province</u>	<u>4941 Wansley Dr. OrL, FL</u>	<u>U. P.</u>

6. LEVEL OF SERVICE: WHEELCHAIR STRETCHER BOTH

7. COMMUNICATIONS EQUIPMENT: TELEPHONE TWO-WAY RADIO OTHER

a. If other, please describe: _____

SECTION II: REQUISITES TO OBTAINING LICENSE

1. PAYMENT OF ALL APPLICABLE FEES:

YES, DATE: _____ NO

2. VEHICLE INSPECTION COMPLETED BY EMS OFFICE:

YES, DATE: _____ NO

3. REFERENCES/LETTERS OF SUPPORT SUBMITTED TO EMS OFFICE (Attachment I):

- Verifiable business or work references for 5 years, including one notarized letter of reference
- Five verifiable personal/business references, including two notarized letters of reference
- Five verifiable credit references, including two notarized letters of reference

4. CURRENT NOTARIZED FINANCIAL STATEMENT SUBMITTED TO EMS OFFICE:

YES, DATE: Jan 4 2021 NO

Example: Current letter from bank verifying business account status (no account numbers please).

5. PROOF OF INSURANCE SUBMITTED TO EMS OFFICE:

YES, DATE: Jan 8 2021 NO

SECTION III: VEHICLES AND STAFFING

1. NUMBER OF VEHICLES IN OPERATION: 1

2. EMPLOYEE ROSTER:

<u>NAME</u>	<u>CURRENT CPR CARD (Y/N)</u>
<u>TOM Province</u>	<u>No</u>

ATTACHMENT I: REFERENCES

1. List previous business experiences or work history for last five years. Submission of one notarized letter of reference from list below is required.

Established in 1996, ProMotion Transportation Services, Inc., has been providing non-emergency transportation services to Central Florida residents and facilities, for the past 25 years.
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2. List five personal or business references. Submission of two notarized letters of reference from list below is required.

NAME	ADDRESS	PHONE
Kelly Pitman	2872 Staten Dr. Deltona, FL 32738	407- 330-9462
William Spain	4216 Pecan Ln. Orlando, FL 32812	407- 493-8140
Ken Thomas	4358 Tidewater Orlando, FL 32812	407- 381-1967
William Schneider	4626 Oak Cove Ln. Orlando, FL 32806	407- 257-4474
Joyce Spain	4216 Pecan Ln. Orlando, FL 32812	407- 342-4923

3. List five credit references. Submission of two notarized letters of reference from list below is required.

NAME	ADDRESS	PHONE
Nancy Blackford Top Auto	1828 S. Division Ave. Orlando, FL 32805	407- 425-0934
Imoh Oton Quick Florida Quotes	15190 SW 136 St. #10 Miami, FL 33196	305- 222-7070
Kyle Kelley, CPA	1620 S. Clyde Morris Blvd. #100 Daytona Beach, FL 32119	386- 788-6057
Auto Zone	3351 S. Conway Rd. Orlando, FL 32812	407- 273-2223
Bank of America	2701 S. Conway Rd. Orlando, FL 32812	407- 249-0605



PARATRANSIT SERVICES:
APPLICATION FOR LICENSE

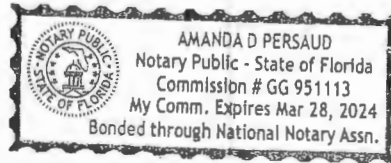
I, the undersigned representative of the service named in this application, do hereby attest the information provided in this application is truthful and honest to the best of my knowledge, and that my service meets all of the requirements for operation of a paratransit services in Orange County and 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.

SIGNATURE OF APPLICANT OR REPRESENTATIVE

11/11/2024

DATE

NOTARY SEAL



NOTARY SIGNATURE

11/11/2024

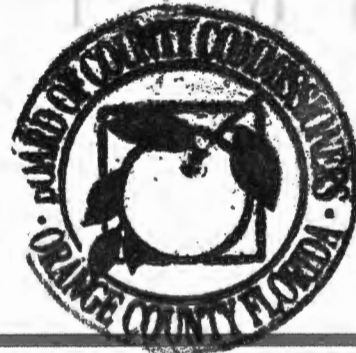
License Paratransit Services

**Orange County
Board of County Commissioners
Emergency Medical Services**

This is to certify that PROMOTION TRANSPORTATION SERVICES
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: April 1, 2021

Date of Expiration: April 1, 2023



Brynn Brooks
Mayor, Board of County Commissioners