

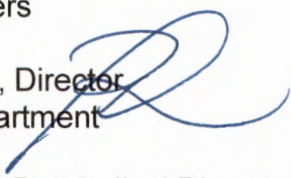


Interoffice Memorandum

AGENDA ITEM

August 25, 2023

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

THRU: Raul Pino, MD, MPH, 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
Providence Transportation Services, LLC
Consent Agenda – September 12, 2023

The EMS Office of the Medical Director requests approval and execution of the Paratransit Services License for Providence Transportation Services, LLC. Providence Transportation Services, LLC 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 Providence Transportation Services, LLC 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 Providence Transportation Services, LLC to provide wheelchair/stretchers service. The term of this license shall be from September 12, 2023, and terminate on September 11, 2025. There is no cost to the County.
(EMS Office of the Medical Director)

CCZ/jj

Attachments



PARATRANSIT SERVICES:
APPLICATION FOR LICENSE

RECEIVED

DATE: 4/20/23
INITIALS: [Signature]

APPLICATION DATE: 4/13/2023

PROPOSED DATE OPERATIONS WILL BEGIN: 5/1/2023

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: Providence Transportation Services

2. BUSINESS ADDRESS (INCLUDE COUNTY):
650 S Alabama Ave APOPKA, FL 32703

3. CONTACT INFORMATION: Business Phone 407-887-6556
Mobile Phone 813-214-1436
Jsimelus29@gmail.com
Email Ptransportus23@gmail.com

4. OWNERSHIP TYPE: PRIVATE CORPORATION GOVERNMENT AGENCY OTHER
a. If other, please describe: _____

5. CORPORATE OFFICERS AND DIRECTORS:

NAME	ADDRESS	POSITION
Jean Simelus	190 Maudehelen St APOPKA, FL	Owner/Driver/CEO
Chilna Joseph Simelus		Driver

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: 4/20/2023 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: 4/14/2023 NO

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

5. PROOF OF INSURANCE SUBMITTED TO EMS OFFICE:

YES, DATE: _____ NO

SECTION III: VEHICLES AND STAFFING

1. NUMBER OF VEHICLES IN OPERATION: 2

2. EMPLOYEE ROSTER:

<u>NAME</u>	<u>CURRENT CPR CARD (Y/N)</u>
Jean Simelus	Y
Chilna Joseph-Simelus	Y
yves Allidor	N

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.

Traffic Control Devices	10/11/2018 Current	407-869-5300 / 242 N Westmonte Dr Altamonte Springs, FL 32714

2. List five personal or business references. Submission of two notarized letters of reference from list below is required.

NAME	ADDRESS	PHONE
✓ Roberson R. Gaud	1655 E Semoran Blvd Suite 14 Apopka, FL 32703	954-260-5019
✓ Merista Valcin	3681 Rochelle Lane Apopka, FL 32712	407-450-4835
Jean Gabriel	2283 Natoma Blvd Mount Dora, FL 32757	407-712-4333
✓ Frank Matulewicz	580 W Franklin Ave Altamonte Springs, FL 32714	407-738-0862
Amos Delisnor	2405 Healy Dr. Orlando, FL 32703	407-860-5395

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

NAME	ADDRESS	PHONE
✓ MidFlorid Credit Union	1199 Spring Centre S Blvd Altamonte Springs, FL 32714	407-755-1328
✓ Fairwinds Credit Union	1621 S Orange Blossom Trail Apopka, FL 32703	407-887-0061
Synchrony Financial	342 S. Park Ave Winter Park, FL 32789	407-599-5455
Jared Galleria Jewels	229 E Altamonte Dr Altamonte Springs, FL 32701	1-800-877-407-339-0556
Wellsfag Bank	2222 E Semoran Blvd Apopka, FL 32703	3616 Corporate 407-886-8881



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.

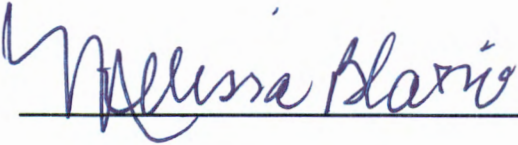


SIGNATURE OF APPLICANT OR REPRESENTATIVE

4.20.2023

DATE

NOTARY SEAL  MELISSA BLASIO
Notary Public
State of Florida
Comm# HH245837
Expires 3/28/2026



NOTARY SIGNATURE

License

Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that Providence Transportation Services, LLC
has complied with the Orange County Code 2001-09 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: September 12, 2023

Date of Expiration: September 11, 2025

By Anna Brooks
Mayor, Board of County Commissioners

