



## Interoffice Memorandum

## AGENDA ITEM

June 24, 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  
Medical Transport Solutions, Inc.  
**Consent Agenda – July 13, 2021**

The EMS Office of the Medical Director requests the approval of the renewal Paratransit Services License for Medical Transport Solutions, Inc. Medical Transport Solutions, Inc. 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 Medical Transport Solutions, Inc. as contained in Orange County Ordinance 2001-09.

**ACTION REQUESTED:** Approval and execution of the renewal Paratransit Services License for Medical Transport Solutions, Inc. to provide wheelchair/stretchers service. The term of this license is from July 1, 2021 through July 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: 02/11/2021

PROPOSED DATE OPERATIONS WILL BEGIN: 05/10/2021

**SECTION I: GENERAL INFORMATION**

1. NAME OF SERVICE: Medical Transport Solutions, Inc.

2. BUSINESS ADDRESS (INCLUDE COUNTY):

16400 NW 14th Street

Pembroke Pines, FL 33028 (Broward County)

3. CONTACT INFORMATION: Business Phone (954) 888-8682

Mobile Phone (786) 463-2510

Email Davidm@medtsolution.com

4. OWNERSHIP TYPE: ☒ PRIVATE CORPORATION ☐ GOVERNMENT AGENCY ☐ OTHER

a. If other, please describe: N/A

5. CORPORATE OFFICERS AND DIRECTORS:

<u>NAME</u>	<u>ADDRESS</u>	<u>POSITION</u>
Daviel Marrero	8138 NW 200th ST	Owner
	Hialeah, FL 33015	

6. LEVEL OF SERVICE: ☒ WHEELCHAIR ☒ STRETCHER ☐ BOTH

7. COMMUNICATIONS EQUIPMENT: ☒ TELEPHONE ☐ TWO-WAY RADIO ☐ OTHER

a. If other, please describe: N/A

**SECTION II: REQUISITES TO OBTAINING LICENSE****1. PAYMENT OF ALL APPLICABLE FEES:**

☒ YES, DATE: 02/11/2021 ☐ 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: 05/03/2021 ☐ NO

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

**5. PROOF OF INSURANCE SUBMITTED TO EMS OFFICE:**

☒ YES, DATE: 05/03/2021 ☐ 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>
Megan Malfe	Y
Melony Malfe	Y

## **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.**

2016 - Present, Owner - Medical Transport Solutions, Inc.

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

NAME	ADDRESS	PHONE
Alberto Delgado	7800 SW 33RD TER MIAMI FL, 33155	(786) 236-3807
Hugo Diaz	5665 W 20TH AVE HIALEAH, FL 33012	(305) 746-5946
Aileen Delgado	11971 SW 93RD TER MIAMI, FL 33186	(786) 402-4947
Jorge Rodriguez	241 N 66TH TER HOLLYWOOD, FL 33024	(954) 278-2676
Tomas Delgado	2411 SW 7TH AVE MIAMI, FL 33129	(305) 219-1750


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

NAME	ADDRESS	PHONE
Dayana Azahares/ William Lehman Leasing	20950 NW 2ND AVE MIAMI, FL 33169	(305) 654-6300
Devin Delatorre/ Delatorre Insurance	12900 SW 128TH ST SUITE 207 MIAMI, FL 33186	(305) 400-8746
David Monter/ Professional Bank	396 ALHAMBRA CIR SUITE 150, CORAL GABLES, FL	(303) 873-2097
Fred Montoya/ The Executive Financial group	10181 NW 58TH SUITE 9, DORAL, FL 33178	(305) 303-3733
Juan Silva/ TD Bank	14836 PINES BLVD PEMBROKE PINES, FL 33027	(954) 538-0068

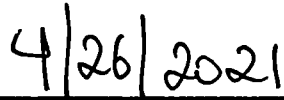


**PARATRANSIT SERVICES:**  
**APPLICATION FOR LICENSE**

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.

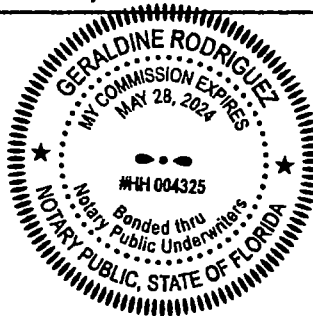


SIGNATURE OF APPLICANT OR REPRESENTATIVE



DATE

NOTARY SEAL





NOTARY SIGNATURE

# License Paratransit Services

Orange County  
Board of County Commissioners  
Emergency Medical Services

This is to certify that MEDICAL TRANSPORT SOLUTIONS, INC.  
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: July 1, 2021

Date of Expiration: July 1, 2023

  
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Mayor, Board of County Commissioners

