



Orange County Government

Orange County
Administration Center
201 S Rosalind Ave.
Orlando, FL 32802-1393

Legislation Text

File #: 25-718, **Version:** 1

Interoffice Memorandum

DATE: April 25, 2025

TO: Mayor Jerry L. Demings and County Commissioners

THROUGH: Raul Pino, MD, MPH, Director

FROM: Christian Zuver, MD, Medical Director

CONTACT: Sandra Roe

PHONE: 407-836-7611

DIVISION: EMS, Office of the Medical Director

ACTION REQUESTED:

Approval and execution of the renewal Paratransit Services License for BESAFE TRANSPORTATION, LLC to provide wheelchair/stretchers service. The term of this license shall be from May 23, 2025, and will terminate on May 22, 2027. There is no cost to the County. (EMS, Office of the Medical Director)

PROJECT: N/A

PURPOSE: The EMS Office of the Medical Director requests approval and execution of the Paratransit Services License for BESAFE TRANSPORTATION, LLC. BESAFE TRANSPORTATION, LLC has submitted the attached renewal application requesting the 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 BESAFE TRANSPORTATION, LLC as contained in Orange County Ordinance 2001-09. All interested and appropriate persons have been notified of this renewal application.

BUDGET: N/A



RENEWAL PARATRANSIT SERVICES:

APPLICATION FOR LICENSE

RECEIVED

DATE: 4/11/25
INITIALS: [Signature]

APPLICATION DATE:

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: DESAFE TRANSPORTATION, LLC
2. BUSINESS ADDRESS (INCLUDE COUNTY): 2605 WEMBUEY CROSS WAY
ORLANDO, FLORIDA 32828
3. CONTACT INFORMATION: Name: CECILE NABONG

Business Phone: 407-275-5344

Mobile Phone: 407-810-8701

Email: cecilenabong@msn.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: Expires 3/8/2026 Auto ☐ NO

SECTION II: VEHICLES AND STAFFING

1. NUMBER OF VEHICLES IN OPERATION: (2)

2. EMPLOYEE ROSTER:

NAME WARREN GOPEZ
ROMAN DEL ROSARIO

Provided to EMS Office

CURRENT CPR CARD (Y/N)

(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.

Cecile Nabong
SIGNATURE OF APPLICANT OR REPRESENTATIVE

4/3/25
DATE:

NOTARY SEAL

Megan Hanrahan
NOTARY SIGNATURE



State of Florida

County of Orange

Sworn to (or affirmed) and subscribed before me by means of ☒ Physical Presence, - OR - ☐ Online Notarization, this 3rd day of April, 2025
(Date) (Month) (Year)

by Cecile Nabong
(Name of Affiant)

Megan Hanrahan (Seal)
(Signature of Notary Public - State of Florida)

Megan Hanrahan
(Name of Notary Public)

Personally Known _____ OR Produced Identification ☒
Type of Identification Produced divers license

License

Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that BESAFE TRANSPORTATION, 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: May 23, 2025

Date of Expiration: May 22, 2027

Bryan W. Brooks
For Mayor, Board of County Commissioners

