

Orange County Government

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

Legislation Text

File #: 25-642, Version: 1

Interoffice Memorandum

DATE: April 10, 2025

TO: Mayor Jerry L. Demings and County Commissioners

THROUGH: Raul Pino, MD, MPH, Department Director

FROM: Christian C. 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 Mears Destination Services, Inc. to provide wheelchair/stretcher service. The term of this license shall be from August 1, 2025 and will terminate on July 31, 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 Mears Destination Services, Inc. Mears Destination Services, Inc. has submitted the attached renewal application requesting approval of a Paratransit Services License to provide wheelchair/stretcher service within Orange County. The EMS, Office of the Medical Director has determined that all requirements have been met by Mears Destination Services, Inc. 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

APPLICATION DATE: 3/31/2025

SECTION I: GENERAL INFORMATION

- 1. NAME OF SERVICE: Mears Destination Services
- 2. BUSINESS ADDRESS (INCLUDE COUNTY): 324 W Gore Street Orlando, FL 32806
- 3. CONTACT INFORMATION: Name: A

Name: Ariel Christenson

Business Phone: 407-422-4561

Mobile Phone: 407-702-5191

Email: achristenson@mears.com

- OWNERSHIP TYPE: ♣PRIVATE CORPORATION □GOVERNMENT AGENCY □OTHER

 a. If other, please describe: □

 LEVEL OF SERVICE: ♣WHEELCHAIR □STRETCHER □BOTH
 PROOF OF CURRENT INSURANCE SUBMITTED TO EMS OFFICE:
 - ☑ YES, DATE: Expires 4/1/2026 □NO

SECTION II: VEHICLES AND STAFFING

- 1. NUMBER OF VEHICLES IN OPERATION: 6
- 2. EMPLOYEE ROSTER: See attached

NAME

CURRENT CPR CARD (Y/N)

Provided to EMS Office

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

3/31/2025

NOTARY SEAL

NOTARY SIGNATURE

YVETTE SERRANO

Notary Public - State of Florida
Commission # HH 434052
My Comm. Expires Aug 28, 2027
Bonded through National Notary Assn.

ZitenseParatransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

nas complied with the Orange County Code	2001-09	and Rules and Regulations
established by the Board of County Commission	ners and is authorized to	operate a Paratransit Service in
Orange County.		
Date of Issue: August 1, 2025	Date of Expiration:	July 31, 2027
		COUNTY O
	BurnW.	Brooks St
	Mayor, Board of C	County Commissioners