July 12, 2018

TO:

Mayor Teresa Jacobs

-AND-

Board of County Commissioners

THRU:

George A. Ralls, M.D., Deputy County Administrator

County Administrator's Office

FROM:

Christian C. Zuver, M.D., Medical Director

Health Services Department Contact: (407) 836-7611

SUBJECT:

Paratransit Services License

Florida Global Transportation Inc. Consent Agenda – July 31, 2018

The EMS Office of the Medical Director requests the approval of the renewal Paratransit Services License for Florida Global Transportation Inc. Florida Global Transportation Inc. has submitted the attached 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 Florida Global Transportation Inc. as contained in Orange County Ordinance 2001-09.

ACTION REQUESTED:

Approval and execution of the renewal Paratransit Services License for Florida Global Transportation Inc. to provide wheelchair/stretcher service. The term of this license is from August 1, 2018 through August 1, 2020. There is no cost to the County. (EMS Office of the Medical Director)

CCZ/cf

Attachments



RENEWAL PARATRANSIT SERVICES:

APPLICATION FOR LICENSE

1 D A	
APPLICATION DATE: July 12, 2018	
SECTION I: GENERAL INFORMATION	
1. NAME OF SERVICE: Florida Global Transportation Inc.	
2. BUSINESS ADDRESS (INCLUDE COUNTY):	
1370 Tropic Park Drive	
Sanford, FL 32773 (Seminole County)	
3. CONTACT INFORMATION: Name: Riyaz Khanfan	
Business Phone: 321-286-5347	
Mobile Phone: 407-334-6770	>
Email: riyaz@flglobaltransportation.com	
4. OWNERSHIP TYPE: BPRIVATE 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:	

SECTION II: VEHICLES AND STAFFING

☑ YES, DATE: 7/12/2018

1. NUMBER OF VEHICLES IN OPERATION: 4

2. EMPLOYEE ROSTER:

NAME	CURRENT CPR CARD (Y/N)
ALBA SOLIS	Y
ORLANDO LANDEIRO	Y
GRISSEL ORTIZ	Y
ALEJANDO RUIZ	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.

SIGNATURE OF APPLICANT OR REPRESENTATIVE

DATE:

NOTARY SEAL

NOTARY SIGNATUR

6-17-21

Notary Public State of Florida
David B Engel
My Commission GG 097771
Expires 08/17/2021

License Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that FLORIDA GLOBAL TRANSPORTATION INC.

has complied with the Orange County Code ______ 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: August 1, 2018 ______ Date of Expiration: August 1, 2020



Mayor, Board of County Commissioners