



Interoffice Memorandum

AGENDA ITEM

August 22, 2019

TO: Mayor Jerry L. Demings
-AND-
Board of 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
Unique NEMTS
Consent Agenda – September 10, 2019

Handwritten signatures in black ink, including one that appears to be "YGM" and another that is more stylized and illegible.

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

ACTION REQUESTED: Approval and execution of the renewal Paratransit Services License for Unique NEMTS to provide wheelchair/stretcher service. The term of this license is from September 30, 2019 through September 30, 2021. There is no cost to the County. **(EMS Office of the Medical Director)**

CCZ/cf

Attachments

C: Danny Banks, Deputy County Administrator



RENEWAL PARATRANSIT SERVICES:

APPLICATION FOR LICENSE

APPLICATION DATE: 08/07/2019

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: Unique NEMTS

2. BUSINESS ADDRESS (INCLUDE COUNTY):
6122 Lokey Dr Orlando, FL 32810
Orange County

3. CONTACT INFORMATION: Name: Vincent Robinson

Business Phone: 407-844-4320

Mobile Phone: 078-467-9494

Email: UNIQUE NEMTS@gmail.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: 7/10/19 NO

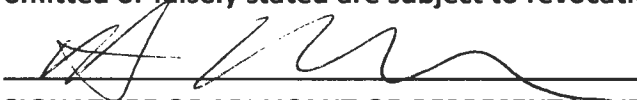
SECTION II: VEHICLES AND STAFFING

1. NUMBER OF VEHICLES IN OPERATION: 3

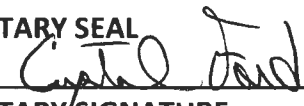
2. EMPLOYEE ROSTER:

<u>NAME</u>	<u>CURRENT CPR CARD (Y/N)</u>
Vincent Robinson	Yes
Colin Campbell	No
Tracy Jewell	Yes
Rohan Brown	Yes

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

08/07/2019
DATE:

NOTARY SEAL

NOTARY/SIGNATURE



License Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that UNIQUE NEM
has complied with the Orange County Code 2001 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 30, 2019

Date of Expiration: September 30, 2021



Byron M. Brooks
Mayor, Board of County Commissioners