

October 22, 2020

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 Direct

EMS Office of the Medical Director

Contact: (407) 836-7611

SUBJECT:

Paratransit Services License

J & K International Inc.

Consent Agenda – November 10, 2020

The EMS Office of the Medical Director requests the approval of the renewal Paratransit Services License for J & K International Inc. J & K International 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 J & K International Inc. as contained in Orange County Ordinance 2001-09.

**ACTION REQUESTED:** 

Approval and execution of the renewal Paratransit Services License for J & K International Inc. to provide wheelchair/stretcher service. The term of this license is from December 1, 2020 through December 1, 2022. There is no cost to the County. (EMS Office of the Medical Director)

CCZ/cf

**Attachments** 



## **RENEWAL PARATRANSIT SERVICES: APPLICATION FOR LICENSE**

| APPLI( | CATION DATE: <u>09/29/2</u>           | <u>020</u>                                 |  |
|--------|---------------------------------------|--|--|
| SECTI  | ON I: GENERAL INFORM                  | <u>ATION</u>                               |  |
| 1.     | NAME OF SERVICE:                      | BK INTERNATIONAL INC.                      |  |
| 2.     | 2. BUSINESS ADDRESS (INCLUDE COUNTY): |  |  |
|        |                                       | GE BLOSSOM TR. 5TE 186                     |  |
| (      |                                       | 2809 ORANGE COUNTY                         |  |
| 3.     | CONTACT INFORMATION:                  | Name: NadIA HICHO                          |  |
|        |                                       | Business Phone: 407 - 930 - 2494           |  |
|        |                                       | Mobile Phone: 407-694-2366 or 407-470-94   |  |
|        |                                       | Email: JKINTERNATIONALGILOGMailicom        |  |
| 4,     | OWNERSHIP TYPE: APRIVA                | ATE CORPORATION DIGOVERNMENT AGENCY DOTHER |  |
|        | a. If other, please desc              | ribe:                                      |  |
| 5.     | •                                     | ELCHAIR ZISTRETCHER ZIBOTH                 |  |
|        | • •                                   | ANCE SUBMITTED TO EMS OFFICE:              |  |
| •      | 1 YES, DATE: 09 1412020               |  |  |
|        | MI TES, DATE: VIETINONO               |  |  |
|        | ·                                     |  |  |
| SECTI  | ON II: VEHICLES AND ST                | <u>AFFING</u>                              |  |
| 1.     | NUMBER OF VEHICLES IN O               | PERATION: 1                                |  |
|        |                                       |  |  |
|        |                                       |  |  |
|        |                                       |  |  |
| 2.     | EMPLOYEE ROSTER:                      |  |  |
|        | NAME YURI PER                         | E2 CURRENT CPR CARD (Y/N)                  |  |
|        | Eddy Sand                             | 4 06                                       |  |
|        | rady sand                             | nez  |  |
|        |                                       |  |  |

| 10.00  |   |
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| Value of the latest of the lat |   |
|  | 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          |
|  | a balaffailaif 251 Affa2 III Otalike Conlity and flig 2 fafe of Libitias 1 actionisales fligt |

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

Mapel (trea)

SIGNATURE OF APPLICANT OR REPRESENTATIVE

omitted or falsely stated are subject to revocation.

09/29/2020

DATE:

**NOTARY SEAL** 

**NOTARY SIGNATURE** 





