



Orange County Government

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

Legislation Text

File #: 25-1132, **Version:** 1

Interoffice Memorandum

DATE: August 5, 2025

TO: Mayor Jerry L. Demings and County Commissioners

THROUGH: Raul Pino, M.D., MPH, Department Director

FROM: Christian Zuver, M.D., Medical Director

CONTACT: Sandra D. Roe

PHONE: 407-836-7611

DIVISION: EMS, Office of the Medical Director

ACTION REQUESTED:

Approval and execution of the Paratransit Services License for Global-Aid Transportation, LLC to provide wheelchair/stretchers service. The term of this license shall be from August 26, 2025, and terminate on August 25, 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 Global-Aid Transportation, LLC. Global-Aid Transportation, LLC has submitted an application for an Alternative Transportation Service/Paratransit license to provide wheelchair/stretchers service within Orange County. The EMS Office of the Medical Director has determined that Global-Aid Transportation, LLC has met the prerequisites for licensure as an alternative transportation service in accordance with Section 20-132 of the Orange County Code. Public notice of this application has been posted and EMS has not received any objections.

BUDGET: N/A



PARATRANSIT SERVICES:
APPLICATION FOR LICENSE

RECEIVED

DATE: 7/10/25

INITIALS: [Signature]

APPLICATION DATE: 7/10/2025

PROPOSED DATE OPERATIONS WILL BEGIN: ASAP

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: Global-Aid Transportation

2. BUSINESS ADDRESS (INCLUDE COUNTY):
2014 Jessamine Ct, Deltona, FL, 32738
Volusia County

3. CONTACT INFORMATION: Business Phone (386) 960-4455
Mobile Phone (407) 708-8793
Email globalaidtransport@gmail.com

4. OWNERSHIP TYPE: PRIVATE CORPORATION GOVERNMENT AGENCY OTHER

a. If other, please describe: Private / LLC

5. CORPORATE OFFICERS AND DIRECTORS:

<u>NAME</u>	<u>ADDRESS</u>	<u>POSITION</u>
<u>Steven Jones</u>	<u>2014 Jessamine Ct, Deltona</u>	<u>CEO</u>

6. LEVEL OF SERVICE: WHEELCHAIR STRETCHER BOTH

7. COMMUNICATIONS EQUIPMENT: TELEPHONE TWO-WAY RADIO OTHER

a. If other, please describe: _____

SECTION II: REQUISITES TO OBTAINING LICENSE**1. PAYMENT OF ALL APPLICABLE FEES:** YES, DATE: _____ NO**2. VEHICLE INSPECTION COMPLETED BY EMS OFFICE:** YES, DATE: _____ NO**3. REFERENCES/LETTERS OF SUPPORT SUBMITTED TO EMS OFFICE (Attachment I):**

- Verifiable business or work references for 5 years, including one notarized letter of reference
- Five verifiable personal/business references, including two notarized letters of reference
- Five verifiable credit references, including two notarized letters of reference

4. CURRENT NOTARIZED FINANCIAL STATEMENT SUBMITTED TO EMS OFFICE: YES, DATE: _____ NO

Example: Current letter from bank verifying business account status (no account numbers please).

5. PROOF OF INSURANCE SUBMITTED TO EMS OFFICE: YES, DATE: _____ NO**SECTION III: VEHICLES AND STAFFING****1. NUMBER OF VEHICLES IN OPERATION:** 8**2. EMPLOYEE ROSTER:**

<u>NAME</u>	<u>CURRENT CPR CARD (Y/N)</u>
Jerry, Bartee (No), Timothy Cambridge (No), Clifton Diaz (No)	
Victor Figueroa (No), Robert Valenzuela (No), Efrain	
Velazquez (No), Leonard Wallery (No), Zuleika Paredes (No)	

ATTACHMENT I: REFERENCES

1. List previous business experiences or work history for last five years. Submission of one notarized letter of reference from list below is required.

Global-Aid Transportation (Almost 10 years)

2. List five personal or business references. Submission of two notarized letters of reference from list below is required.

NAME	ADDRESS	PHONE
Abigail Floyd	abigailf@sccu.com 2690 Enterprise Rd, Orange City	(321) 752-2222 (9) Ext 6365
Miriam Nsheiwat	miriam.nsheiwat97@gmail.com 2690 Enterprise Rd, Orange City	(386) 785-4684
Ashley Hancock	ashleyh@sccu.com 2690 Enterprise Rd, orange city	(321) 752-2222 (9) Ext 6365
Christina Barroso	christinabarroso93@gmail.com 2690 Enterprise Rd, orange city	(321) 752-2222 (9) Ext 6365
Maria Ortega	manguaim2@gmail.com 2690 Enterprise Rd, orange city	(407)-288-2104


3. List five credit references. Submission of two notarized letters of reference from list below is required.

NAME	ADDRESS	PHONE
Space Coast	2690 Enterprise Rd, Orange City	(321) 752-2222 (9) Ext 6365
Brown & Brown Insur	1661 Worthington Road, Suite 175 West Palm Beach, FL, 33409	(561) 688-5066
Biberk Insur	1314 Douglas St, #1400 Omaha, NE 68102	1-844-472-0967
Westlake Financial	P.O. Box 76809, Los Angeles, CA 90076-0809	(888) 739-9192
Grasshopper	197 1st Avenue Needham, MA	(900) 820-8210 1-617-395-5700



PARATRANSIT SERVICES:
APPLICATION FOR LICENSE

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

July 10th, 2025

DATE

NOTARY SEAL





NOTARY SIGNATURE

License

Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that Global-Aid 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: August 26, 2025

Date of Expiration: August 25, 2027

Burton Brooks
for Mayor, Board of County Commissioners

