

January 10, 2019

TO:

- Mayor Jerry L. Demings -AND-Board of County Commissioners
- THRU: John Goodrich, Acting Director 5, booldich Health Services Department
- FROM: Christian C. Zuver, M.D., Medical Director Health Services Department Contact: (407) 836-7611
- SUBJECT: Paratransit Services License Universal Transportation Management Inc Consent Agenda – January 29, 2019

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

ACTION REQUESTED:

Approval and execution of the renewal Paratransit Services License for Universal Transportation Management Inc to provide wheelchair/stretcher service. The term of this license is from January 31, 2019 through January 31, 2021. There is no cost to the County. **(EMS Office of the Medical Director)**

CCZ/cf

Attachments



RENEWAL PARATRANSIT SERVICES:

APPLICATION FOR LICENSE

APPLICATION DATE: December 26, 2018

SECTION I: GENERAL INFORMATION

- 1. NAME OF SERVICE: Universal Transportation Management Inc
- 2. BUSINESS ADDRESS (INCLUDE COUNTY):

750 S. Orange Blossom Orlando, FL 32805 Orange County

3. CONTACT INFORMATION: Name: Anderson Louis Jeune

Business Phone: 561-729-3698

Mobile Phone: 561-767-5721

Email: anderson1956@hotmail.com

- 4. OWNERSHIP TYPE: DPRIVATE CORPORATION GOVERNMENT AGENCY OTHER
 - a. If other, please describe: ___

5. LEVEL OF SERVICE: DWHEELCHAIR DSTRETCHER DBOTH

6. PROOF OF CURRENT INSURANCE SUBMITTED TO EMS OFFICE:

☑ YES, DATE: 12-26-2018 □NO

SECTION II: VEHICLES AND STAFFING

1. NUMBER OF VEHICLES IN OPERATION: 1

2. EMPLOYEE ROSTER:

NAME

CURRENT CPR CARD (*/N

Anderson Louis Jeune

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 ract was intentionally omitted or falsely stated are subject to revocation.

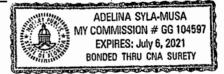
SIGNATURE OF APPLICANT OR REPRESENTATIVE

019

DATE:

NOTARY SEAL

NÓTARY SIGNATURE



2

License Paratransit Services

Orange County Board of County Commissioners Emergency Medical Services

This is to certify that UNIVERSAL TRANSPORTATION MANAGEMENT INC has complied with the Orange County Code 2001-9 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: January 31, 2019

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Date of Expiration: January 31, 2021

yor, Board of County Commissioners