



# TRANSPORTATION LICENSE APPLICATION

**FOR INTERNAL USE ONLY**

COMPANY NAME: \_\_\_\_\_

VH Permit # \_\_\_\_\_

Applicant is seeking a permit to operate the following vehicles at the Port: (Insert number of vehicles in each category)

\_\_\_\_ Taxi \_\_\_\_ Limousine/Sedan/Van (under 17 passengers) \_\_\_\_ Bus/Passenger Van (more than 18 passengers)

\_\_\_\_ TOTAL NUMBER OF VEHICLES \_\_\_\_ TOTAL NUMBER OF EMPLOYEES TO WORK AT PORT

### MAILING

Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

### OTHER

Corporate Officer or Owner's Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Type of Ownership: ( ) Sole Proprietorship ( ) Partnership ( ) Corporation

Date of Incorporation or Creation: \_\_\_\_\_

### List of Three Business References, Address and Phone Number:

1.)
2.)
3.)

### VEHICLE DETAILS

Year	Make	Model	VIN (attach vehicle registration)	License Tag	Decal # (Office Use)

(Attach additional sheets if necessary)

The applicant agrees that when this application is approved and a license is granted to abide by all the rules and regulations of the Port of Palm Beach District and all the provisions of the Port of Palm Beach District Tariff, as amended periodically. Nothing contained herein shall relieve Applicant or its employees from the obligation to comply with security requirements now existing or hereinafter imposed by the Port of Palm Beach District, Local, State, and Federal Authorities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Date