

GROUND TRANSPORTATION OPERATING PERMIT								
Type of Permit:		TRANSPORTATION SER	TRANSPORTATION SERVICE CATEGORY:					
🗌 New Permit App	plication (\$25.00 fee)	🗆 Taxi	□ Shuttle					
Renewal Permit Application (\$25.00 fee)		□ Limousine	🗆 Courtesy Vehicle					
		□ Non-Commercial						
<u>Company/Permitt</u>	T <u>EE INFORMATION:</u> (Please print le	egibly or type)						
Legal Business Nai	me:							
DBA: (If applicable)								
Owner/ Manager	· · · · · · · · · · · · · · · · · · ·							
Billing Address:								
(TNC enter corporate billing address.)	City:	State:	Zip:					
Business Phone:		Cell Phone:						
Email:								
<u>Contact Informat</u>								
	Name:							
Transponder Point of Contact	Phone/Fmail							
יוויס	Name:							
Billing Point of Contact	Phone/Email:							
Insurance Point of Contact	·							
	Name:							
	Phone/Email:							

COMPANY INFORMATION ADDED TO AIRPORTS WEBSITE

- □ Please *include us* on the Colorado Springs Airport website (<u>www.flycos.com</u>).
- □ We *do not wish* to be included on the Colorado Springs Airport website (<u>www.flycos.com</u>).

Company Website:

Please provide, even if you do not wish to be on our website.



ACKNOWLEDGEMENTS:

- *Bv checking this box* I confirm my business is in good standing and current with the Colorado Secretary of State Business Center (https://www.sos.state.co.us). • **ID** #
- *By checking this box* I confirm my business is in good standing and current with the Colorado Public Utilities Commission (http://www.dora.state.co.us/pls/real/PUC_Permit.Search_Form), if required. • PUC #_____
- TNC Permittee Only By checking this box I confirm my business will upload the trip report for trips made for the preceding month's activity to the Transportation Security Clearinghouse (TSC) and submit payment for said trip fees to TSC by the 10th of the following month.
- By checking this box I confirm my business is not required by the State of Colorado to maintain Worker's Compensation and Employer's Liability insurance. See insurance requirements in the GT Rules & Regulations. (INITIAL) ______.

ACCEPTANCE OF TERMS AND GROUND TRANSPORTATION RULES AND REGULATIONS:

By signing below, I acknowledge that I have read and received the most current copy of the Colorado Springs Airport Ground Transportation Rules and Regulations. These Colorado Springs Airport Ground Transportation Rules and Regulations incorporated herein by reference and I agree to all the terms, provisions and limitations contained in the document.

Signed:		Date:	
Name, Title:			
	For the City of Colorado Springs		
		Date:	
COS Ground Tr	ransportation, Reviewer		



VEHICLES COVERED UNDER THIS PERMIT

All changes and/or vehicle updates to the list below during your one-year permit <u>must be submitted</u> to <u>cos transportation-SMB@coloradosprings.gov</u> in writing.

Vehicle Year & Make	Model	State	License Plate #	VIN#	Unit/ Cab #	Vehicle Passenger Capacity

**Please note:

Be sure to include the license plate # for all vehicles. The AVI lane system reads the plates to open the AVI arm.