

2009

**COLUMBUS REGIONAL AIRPORT AUTHORITY
PORT COLUMBUS INTERNATIONAL AIRPORT**

**APPLICATION FOR PERMIT TO PROVIDE COURTESY GROUND
TRANSPORTATION SERVICES**

By completing this application, Applicant agrees that if a permit is granted, Applicant will observe and comply with all of the terms and conditions of the Ground Transportation Regulations, as published and amended by the Columbus Regional Airport Authority.

Each application must be accompanied by true, correct, and current copies of certificates of public convenience or licenses issued by the Interstate Commerce Commission, the Ohio Public Utility Commission, the City of Columbus, or any other federal or state government agency having jurisdiction over Applicant's transportation activities, authorizing Applicant to engage in the transportation service which Applicant proposes to provide at or from Columbus Regional Airport Authority facilities.

Original application must be returned by mail or in person. Copies of necessary documents must be legible.

I. GENERAL INFORMATION

Name of Applicant (company)_____

Mailing Address_____

Business Address_____

Telephone Number_____ Fax Number_____

Contact Person_____

Email Address (required)_____

Please list all Owners/Managers responsible for transportation services:

Name _____

Title _____ Business Telephone Number _____

Business Address _____

Name _____

Title _____ Business Telephone Number _____

Business Address _____

II. ATTACHMENTS REQUIRED

Checklist:

____A. Copy of insurance for Workers' Compensation MUST be attached or a written statement indicating why you are not required to carry Workers' Compensation.

____B. Certificate of automobile insurance MUST be attached. Also, it must list the COLUMBUS REGIONAL AIRPORT AUTHORITY as an additional insured and provide 30 days notice in the event of cancellation or material change.

____C. Original notarized Affidavit must be submitted.

____D. Applicant must complete and enclose "Driver Information Form".

____E. Applicant must complete and enclose "Automatic Vehicle Identification (AVI) and Vehicle Information Log".

____F. Complete route sheet, including days and hours of service. Ground Transportation must be notified if route is changed.

____G. State of Ohio "Secretary of State Certificate".

____H. A vehicle add/delete form for decals is included to amend any future updates after approved application permit is issued.

____I. Applicant must complete the attached credit card authorization form for the E-Z park program. Two credit cards are required for this application to be processed.

FAILURE TO PROVIDE ANY REQUESTED INFORMATION MAY BE
GROUNDS FOR DENIAL OF A GROUND TRANSPORTATION
PERMIT.

Name (print)_____

Name (signature)_____

Title_____

Date_____

Application and any correspondence should be forwarded to the address listed below.

Columbus Regional Airport Authority
Parking, Transportation, and Auditing Services
Charlie Evranian, Ground Transportation Supervisor
4600 International Gateway
Columbus, Ohio 43219
Phone: (614) 239-4071
Or (614) 239-3024
www.columbusairports.com
cevrastian@columbusairports.com

Route Sheet

Please list hours of service for each day. If schedule is “as needed” please indicate.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Please list your route schedule for each day.

Sunday	From: To:
Monday	From: To:
Tuesday	From: To:
Wednesday	From: To:
Thursday	From: To:
Friday	From: To:
Saturday	From: To:

Regional Airport Authority by anyone (including Affiant's employees) for injuries, death, loss or damage, alleged to be caused by, through or in connection with the existence, exercise and use of the rights authorized by the Columbus Regional Airport Authority.

6. Vehicle decals must be immediately permanently attached to the bumper and may not be transferred from the vehicle to which they are assigned. Decals are the sole property of the Columbus Regional Airport Authority and cannot be sold or conveyed to another party. Any person who fails to return a decal upon the request of Authority personnel, or upon the sale or transfer of the vehicle and/or company, may be charged with petty theft pursuant to Section 2913.02(A)(2), Ohio Revised Code.
7. The above-named individual and/or organization agrees to pay within 30 days of the invoice date, any fees assessed by the Columbus Regional Airport Authority or designee. The above named individual and/or organization also agrees that at if any time the account exceeds 30 days, access to the Ground Transportation area will be restricted until the account is rectified and the Columbus Regional Airport Authority may require the above named individual and/or organization to pre-pay for future activity at Authority facilities.
8. The above-named individual and/or organization avers under penalties of perjury that the information attached hereto is correct to the best of their knowledge and belief.
9. This permit expires on December 31, of any permit year. I am responsible to renew this permit on an annual basis by no later than December 31, of each permit year.

Signature

Date

Sworn to and subscribed in my presence this _____ day of _____, 200_.

Notary

Columbus Regional Airport Authority

COMMERCIAL OPERATOR BILLING AUTHORIZATION:

Ground Transportation Company _____

Address _____

City/State/Zip _____

Telephone # (____) _____ Fax # (____) _____

Primary Credit Card Issued to: _____ # _____

Expiration Date ____/____/____

Please Check One: Corporate Account Personal Account

Circle type of Credit Card: MC, VS, AMX, DIS, DIN

2nd Credit Card (required) Issued to: _____ # _____

Expiration Date ____/____/____

Please Check One: Corporate Account Personal Account

Circle type of Credit Card: MC, VS, AMX, DIS, DIN

E-mail Address _____

Dear Ground Transportation Company,

To ensure prompt billing and accurate access charges, the above form will authorize the Columbus Regional Airport Authority Ground Transportation & Parking Services Division to charge the Primary Credit Card nightly, all access charges to the Ground Transportation area for the previous day. **Please be advised, the number of trips will correspond to the number of charges (4 trips = 4 charges). Two (2) Credit Cards are required** however the secondary credit card will only be used if the primary card is unable to accept the charges for any reason. In the event that both credit cards are unable to be charged, the commercial operator may be subject to deactivation of all AVI cards until payment is received. All AVI cards issued to the commercial operator will be included in this system regardless of the access fee associated with the card or the frequency of use. Your activity for the previous month will be emailed. Please contact the Parking & Transportation office with any Credit Card changes as soon as possible. Be advised that your primary and secondary credit cards must be able to accept your daily charges, please ensure that both cards have enough credit availability each day. Frequent denied transactions will prohibit your access to the Ground Transportation Area.

REQUEST FOR CHANGE OF VEHICLE(S)

ANY CHANGE OF VEHICLE INFORMATION MUST BE SUBMITTED ON THIS FORM.

Company: _____ Date: _____

VEHICLE #1
circle one: **ADD** **DELETE** **LOST***
Year: _____
Make: _____
Model: _____
Plate No: _____
Airport G.T. Decal No.: _____

VEHICLE #2
circle one: **ADD** **DELETE** **LOST***
Year: _____
Make: _____
Model: _____
Plate No: _____
Airport G.T. Decal No.: _____

VEHICLE #3
circle one: **ADD** **DELETE** **LOST***
Year: _____
Make: _____
Model: _____
Plate No: _____
Airport G.T. Decal No.: _____

VEHICLE #4
circle one: **ADD** **DELETE** **LOST***
Year: _____
Make: _____
Model: _____
Plate No: _____
Airport G.T. Decal No.: _____

I hereby certify that the above referenced information is true and correct and all vehicles meet insurance requirements. Also, I understand decals may not be transferred from the vehicle they are assigned and must be returned if the vehicle is sold or removed from service.

(SIGNATURE MUST APPEAR BELOW.)

Name: _____ Title: _____

***LOST DECALS MUST HAVE A NOTARIZED LETTER STATING CIRCUMSTANCES.**