

Ground Transportation Provider Operating Permit Application Package

6900 Airport Boulevard Sacramento, CA 95837



Ground Transportation Provider Registration Checklist

Included in this package:					
1.	☐ Ground Transportation Provider Company Information All applicable sections must be completed.				
2.	☐ Ground Transportation Provider Vehicle List All vehicles to be used in this service must be listed.				
Addition	al documents to be provided:				
1.	☐ A copy of the appropriate certificate or permit: Transportation Charter Party (TCP) certificate, Passenger Stage Carrier (PSC) certificate, Interstate Commerce Commission certificate or Sacramento County Taxi Permit.				
2.	☐ An ACORD Certificate of Liability Insurance indicating that the required coverages are in force on all vehicles to be used in this service (See Section 6 (General Insurance Requirements) of the Sacramento International Airport Ground Transportation Rules and Regulations for minimum requirements.)				

NOTE: All required documents must be presented before an Operating Permit will be issued.



SACRAMENTO INTERNATIONAL AIRPORT Ground Transportation Provider Company Information

Name of Permittee:	
DBA:	
Partner(s) or Corporate Office	ers:
Business address:	
City:	State: Zip:
Telephone Number:	Fax Number:
Cell Phone Number:	Email address:
TCP#	PSC#
ICC#	Sacramento County Taxi Permit #
Describe the type and frequent provide and the area(s) to be	ncy of ground transportation service that you wish to served.
Provider permit application particular particular provider submitting the County provided AVI tags	ontained on all pages of this Ground Transportation ackage is accurate and complete. In this registration package and accepting installation of on my company's vehicles, I am agreeing to comply with the Sacramento
•	ransportation Rules and Regulations.
	Permittee's signature Date



Ground Transportation Provider Vehicle Checklist

Permittee:		DBA:				Date:		
Vehicle number (i.e. Sunset Cab 05)	Make	Model year	Model	Color	License plate	Vehicle Identification Number (VIN)	Seating capacity (Not counting driver)	AVI tag number (To be filled in by Airport staff)

Vehicles not listed may not be operated under this permit. Failure to list all vehicles will be deemed reason for denial or later suspension and/or revocation of the permit. You must notify the Director of any changes in your equipment list within 10 days.



SMF Ground Transportation Provider Roster Driver Registration Form

Company Name:	TCP# If Applicable:

<u>Driver's First Name</u>	<u>Driver's Last Name</u>	DL#	Expiration Date	Cab Number:



Ground Transportation Provider Customer Service Contacts

Airport Website (<u>www.sacairports.org</u>)

Downloadable copies of

- Ground Transportation Provider Registration Package
- Chapter 11.09 of Title 11 of the Sacramento County Code
- Ground Transportation Rules and Regulations

Airport Operations (916) 874-0561

General information about

- Ground transportation permits
- Automated vehicle identification (AVI) system
- Rates & charges

All other customer service issues

Airport Accounting (916) 874-0629 or (916) 874-0753

Invoice questions

Airport Badging Office (916) 874-0693

Permits

AVI transponder issuance/installation Report a lost or stolen AVI transponder

To file a complaint write to:

Airport Operations Sacramento International Airport 6900 Airport Blvd Sacramento, CA 95837