Department of Transportation & Public Works



Passenger Transportation Regulatory Division 601 NW 1st Court, 18th Floor Miami, FL 33136 Tel (786) 469-2300 Fax (786) 469-2313

TEMPORARY FOR-HIRE PASSENGER MOTOR CARRIER AND LIMOUSINE LICENSE APPLICATION VALID THROUGH November 21, 2022 through December 11, 2022

1 INSTRUCTIONS:

This document outlines the procedures to be followed to apply for a temporary limousine or passenger motor carrier (PMC) license. Temporary licenses may be applied for by limousine or PMC operators currently licensed by Chapter 31 Articles III and VI of the Miami-Dade County Code. Listed below are the classes of services and their definitions:

Luxury Sedan:	A luxury, non-metered vehicle of a wheelbase size smaller than a stretch limousine, as defined by DTPW. Currently, DTPW qualifies vehicles with an original Manufacturer Suggested Retail Price (MSRP) of at least \$45,000.00. Vehicles considered luxury sedan limousines include, but are not limited to Lincoln Town car, Cadillac CTS-V, and Mercedes-Benz and luxury SUV's. No vehicle that exceeds ten (10) model years of age will be licensed.
Stretch:	A sedan cut and stretched a minimum of forty-two (42) inches beyond its standard basis, manufactured to carry between six to eight persons, excluding the drivers. No vehicle that exceeds ten (10) model years of age will be licensed.
Super Stretch:	A luxury vehicle stretched a minimum of one hundred twenty (120) inches beyond its standard basis, manufactured to carry between nine or more passengers including the drivers. No vehicle that exceeds ten (10) model years of age will be licensed.
Passenger Motor Carrier:	Passenger motor carrier means a nine passenger or greater (excluding chauffeur) for-hire passenger motor vehicle including, but not limited to, a fixed route, circulator or jitney vehicle designed, constructed, reconstructed and equipped as required in this chapter to provide passenger motor carrier service. No vehicle that exceeds ten (10) model years of age will be licensed.

- Complete and notarize the application form. Type or print neatly.
- All questions must be answered completely by applicant. Do not leave blanks. Note N/A if not applicable.
- Submit as Attachment #1 copies of the Certificates of Insurance for each vehicle. Each certificate must include a Schedule
 of Insured Vehicles and Drivers. Each certificate of insurance must include limits of liability no less than one hundred
 thousand dollars (\$100,000.00) per person, and three hundred thousand dollars (\$300,000.00) per occurrence for bodily
 injury, and fifty thousand dollars (\$50,000.00) per occurrence for property damage. If you wish to submit a blanket
 certificate of insurance, a listing of all the vehicles and drivers covered under the insurance must be provided along with the
 certificate.
- Submit as attachment #2 copies of valid driver's licenses for all chauffeurs listed on the application who are not licensed by Miami-Dade County.
- The fee for a temporary license is \$100.00 per vehicle. Non-Licensed Miami-Dade License Holders must pay an additional \$100.00 application processing fee. Your check or money order should be made payable to "Miami-Dade County".

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Stretch Super Stretch				
No. of vehicles:	No. of vehicles:	No. of vehicle	No. of vehicles:	
3 APPLICANT INFORM	IATION:			
1. Name of Com	pany			
Company Add	ress			
City	State	Zid	County	
City				
Phone	State F	Business Name (DBA)		
Event Contact	Person		Phone	<u> </u>
Event Contact	Person Ferson For-Hire License No		Phone	<u> </u>
Event Contact Miami-Dade C	Person ounty For-Hire License No		Phone	2
Event Contact Miami-Dade C Full Name of C	Person ounty For-Hire License No Dfficer/Director/Shareholder		Phone	2
Event Contact Miami-Dade C Full Name of C	Person ounty For-Hire License No		Phone	2
Event Contact Miami-Dade C Full Name of C Title(s)	Person ounty For-Hire License No Dfficer/Director/Shareholder	Business Phone	Phone	;
Event Contact Miami-Dade C Full Name of C Title(s) Full Name of C	Person ounty For-Hire License No Dfficer/Director/Shareholder Dfficer/Director/Shareholder	Business Phone	Phone	2
Event Contact Miami-Dade C Full Name of C Title(s) Full Name of C	Person ounty For-Hire License No Dfficer/Director/Shareholder	Business Phone	Phone	2
Event Contact Miami-Dade C Full Name of C Title(s) Full Name of C Title(s)	Person ounty For-Hire License No Dfficer/Director/Shareholder Dfficer/Director/Shareholder	Business Phone Business Phone	Phone	!

4 DESCRIPTION OF VEHICLE(S):

All vehicles working under a temporary for-hire license shall conform to the vehicle requirements of Chapter 31 pertaining to maximum vehicle age and vehicle type. Refer to the Instructions Section for explanation of the vehicle requirements.

For each	vehicle liste	ed below tl	hat will be used, o	complete the following	(List all	other vehic	les in a separate sheet):
YEAR	MAKE	MODEL	NO. OF SEATS	COLOR	VIN#	TAG	STATE

5 CHAUFFEUR IDENTIFICATION:

All operators shall assure that each chauffeur possesses a current and valid chauffeur's (driver's) license issued by a state. A copy of such license shall be forwarded with the application form.

List the names of all chauffeurs authorized to operate the vehicle(s) under temporary license(s)							
(List additional chauffeurs on a separate sheet.)							
NAME	D/O/B	DL #	STATE	CHAUFFEUR'S REG. #	COUNTY/STATE		

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6 APPLICANT CERTIFICATION

Before me, the undersigned authority, this day personally appeared ________, who, being by me first duly sworn, deposes and says, that he/she is the applicant in the foregoing application, and that the statements made herein and attached hereto are true and genuine, grants authority to Miami-Dade County to verify the information contained herein, understands that Miami-Dade County reserves the right to deny this application based upon the misrepresentation, alteration, omission, incompletion of material fact, or for any of the reasons set forth in the Rules and Regulations for Issuance of Temporary For-Hire Limousine Licenses and/or Passenger Motor Carrier, and agrees to operate in compliance with Chapters 25, 28A and 31 of the Code of Miami-Dade County should this application be approved.

Signature of Applicant

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20 _____,

Notary Public

SEAL

CORPORATE SEAL