CITY OF APOPKA
DEVELOPMENT REVIEW COMMITTEE

DATE: **September 14, 2016**
TIME: **9:00 AM Development Review Committee Meeting**
LOCATION: **120 E. Main Street (Administration Conference Room – 1st Floor)**

I. Staff Comments on the following:

A. Special Events: None

B. Concept Plan: None

C. Site Plans:

1. Tractor Supply Store (Re-Submittal) SPR16-05
   Preliminary Development Plan
   Location: 180 West 1st Street
   Parcel No.: 09-21-28-0196-10-040

D. Plats: None

E. Street Name Review: None

F. FLUM / Rezoning: None

G. Special Exception: None

II. Other Business:

A. Public Hearing: None

B. Vacate/Variance: None

C. Request for Extension: None

D. Discussion: None

E. Peddlers/Solicitor/Vehicle for Hire Permit:

2. Vehicle for Hire - Lil Bit Transportation - Antoinette Wright
3. Vehicle for Hire Driver - Lil Bit Transportation - Stella Gregory

F. Plan Final Review and Sign-off: **Projects at "Zoning Counter"**

Please direct any comments or questions concerning the items scheduled for this meeting to the Community Development Department at (407) 703-1712.

David B. Moon

David B. Moon, AICP
Planning Manager

Backup material for agenda item:

2. Vehicle for Hire - Lil Bit Transportation - Antoinette Wright

Community Development Department
120 East Main Street
Apopka, Florida 32703
Phone: 407-703-1712
communitydevelopment@apopka.net

VEHICLE FOR HIRE PERMIT APPLICATION

FILING THIS APPLICATION AND REMITTING THE APPLICATION AND VEHICLE FOR HIRE FEE(S) FOR A CITY VEHICLE FOR HIRE PERMIT DOES NOT ALLOW THE APPLICANT TO OPERATE OR ENGAGE IN ANY TYPE OF BUSINESS, OCCUPATION OR PROFESSION UNTIL A VEHICLE FOR HIRE PERMIT IS ISSUED TO THE APPLICANT. NOTE: THE $10.00 NON-REFUNDABLE APPLICATION FEE IS IN ADDITION TO THE BUSINESS TAX FEE(S).

Business Information	**Owner Information (If corporation, provide corporate officer information)**
Name: LiL Bits Transportation	Name: Antionette Leright
Address: 409 yearling cave loop	Address: 409 yearling cave loop
Shopping Center:	City/State/Zip: Apopka FL 32703
City/State/Zip: Apopka FL 32703	Phone: [redacted] Fax:
Phone [redacted] Fax:	Email Address [redacted]
Mailing Address (If different than above)	
Street: same as Above	
City/State/Zip	

List of Vehicles to be used:

2015	Make:	FORD	Model:	E350	Tag #:	[redacted]	Color: white
2008	Make:	FORD	Model:	E 350	Tag #:		Color: white
	Make:		Model:		Tag #:		Color:

Have you ever been convicted of any felony, misdemeanor, or violation of any municipal ordinance? ☐ Yes ☑ No				
If yes, please explain:				
Name/Address/Phone Number of two (2) reliable character/business references:				
Name: Steven Poole	Address: [redacted]	Grand Canyon Dr	Phone No.:	[redacted]
Name: Debbie Anderson	Address: [redacted]	yearling Cave loop	Phone No.:	[redacted]
Federal Tax ID Number (FEI#): [redacted]		OR	Social Security #:	[redacted]
Fictitious Name Registration #:			Corporate Doc #:	

Community Development Dept.
120 East Main Street
Apopka, Florida 32703
Phone: 407-703-1712
communitydevelopment@apopka.net

BUSINESS TAX RECEIPT APPLICATION

FILING THIS APPLICATION AND REMITTING THE APPLICATION AND BUSINESS TAX FEE(S) FOR A CITY BUSINESS TAX RECEIPT DOES NOT ALLOW THE APPLICANT TO OPERATE OR ENGAGE IN ANY TYPE OF BUSINESS, OCCUPATION OR PROFESSION UNTIL A BUSINESS TAX RECEIPT IS ISSUED TO THE APPLICANT. NOTE: THE $10.00 NON-REFUNDABLE APPLICATION FEE IS IN ADDITION TO THE BUSINESS TAX FEE(S).

Business Information	Owner Information (If corporation, provide corporate officer information)
Name: LaBit's Transportation	Name: Antionette Lewant
Address: 409 Yearling Cove Loop	Address: 409 Yearling Cove Loop
Shopping Center:	City/State/Zip: Apopka FL 32703
City/State/Zip: Apopka FL 32703	Phone [redacted] Fax:
Phone [redacted] Fax:	Email Address [redacted]
Mailing Address (If different than above)	
Street: Same as above	
City/State/Zip	

Business Description (In Detail):

Federal Tax ID Number (FEI #): [redacted] **OR** Social Security Number: [redacted]

Fictitious Name Registration #: _____ **OR** Exemption Status: _____

(Attach Copy) (Licensed Professional, First & Last Name Used, Incorporated, Attorney)

Regulatory License/Certification: _____ Corporate Doc: _____

CERTIFICATION: I certify that all the information contained herein is true and correct to the best of my knowledge and belief. If any portion is found to be false or misrepresented, such fact may be just cause for immediate revocation of any business tax receipt(s) issued to me. I acknowledge that the issuance of this business tax receipt is contingent upon complying with the building and fire requirements of the City. Inspections will be performed and should deficiencies be found that are in conflict with required codes, I understand that the City will **not** issue the business tax receipt until I (or the owner of the building if leased) make the required corrections. I understand that should corrections be necessary, I am **not** permitted to operate this business until those corrections have been made and all applicable fees have been paid. It is further understood that I must FULLY comply with the Codes of the City of Apopka.

I understand that an Orange County business tax receipt must be obtained after the City business tax receipt is issued.

I further understand that it is the applicant's responsibility to secure the business tax receipt(s) prior to conducting business in the City of Apopka.

Applicant Info (If different that owner info)	*I have read the foregoing document and the facts stated in it are true.*
Name:	
Address:	
City/State/Zip:	
Phone: Fax:	Applic[illegible] Signature: Antionette Lewant
Email Address:	Date S[illegible]ted:

BUSINESS TAX RECEIPT APPLICATION

PLANNING & ZONING DIVISION

Date Received:	**Date Approved:**	**Approved By:**
Telephone and/or Mobile Business Only: Yes:	**No:**	**Zoning Est.:**
Legal Description:		
Comprehensive Plan (Land Use)		
Comments:		

Classification Code	Description	Business Tax Number

Notes:	

Fee Type	Fee Amount	Date Paid	Date Issued	Cash Receipt #	Debit/Credit Receipt #	Check #
Application Fee:	10.00	8-25-16			31010	
Background Check/ Fingerprinting Fee:	42.50	8-25-16			31010	
BTR Fee:						
Vehicle of Hire Permit Fee:						
TOTAL:						

Issued by:	

6

CITY OF APOPKA

Vehicle For Hire
Antoinette Wright
Lil Bit's Academy
Organization

The City of Apopka does not endorse the validity, reliability, or merchantability of the product or cause, which this permit allows. Any misrepresentation or irregularity should be reported to the Police Department by calling 407-703-1771.

CITY OF APOPKA

Address: 409 Yearling Cove Loop
Apopka, FL 32703

[redacted]

This permit does not authorize or imply that the person named and photographed appearing hereon is permitted to solicit in those neighborhoods and/or at those residences that are posted with "No Soliciting" signs.

Date Issued
09-06-2016

Date Expires
09-06-2017

App. fee # 10.00
Fingerprints/
Background # 42.50
Fee

PD
8-25-16

CITY OF APOPKA-BUSINESS T
120 E MAIN ST
APOPKA, FL 32703
407-703-1709

Merchant ID: 270156201
Term ID: 1002

Sale

Application Label: VISA CREDIT
VISA
XXXXXXXXXXXX3003 Antionette Wright
AID: A0000000031010
Entry Method: Chip
Apprvd: Online Batch#: 000005
08/25/16 08:46:24

Inv#: 00000002 Appr Code: 025657

Total: $ 52.50

TVR: 8080008000
TSI: 6800
I agree to pay above total amount
according to card issuer agreement
(Merchant agreement if credit voucher)

WRIGHT/ANTOINETTE R

Merchant Copy

THANK YOU

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000038345

Entity Name: LIL BIT'S ACADEMY AND TRANSPORTATION INC

Current Principal Place of Business:

409 YEARLING COVE LOOP
APOPKA, FL 32703

Current Mailing Address:

409 YEARLING COVE LOOP
APOPKA, FL 32703

FEI Number: [redacted]

FILED
Apr 25, 2016
Secretary of State
CC0625417265

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, ANTIONETTE R
409 YEARLING COVE LOOP
APOPKA, FL 32703 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO
Name	WRIGHT, ANTIONETTE R
Address	409 YEARLING COVE LOOP
City-State-Zip:	APOPKA FL 32703

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTIONETTE WRIGHT CEO 04/25/2016

Electronic Signature of Signing Officer/Director Detail — Date

INDEMNITY AND HOLD HARMLESS AGREEMENT

THIS AGREEMENT made and entered into this 24th day of August, 2016, by and between, Antionette Wright hereinafter referred to as "Business Owner" and the CITY OF APOPKA, FLORIDA, hereinafter referred to as "The City."

WHEREAS, Antionette Wright hereby agrees to indemnify and hold harmless the City and all of the City's officers, representatives, employees, and/or agents arising out of, or resulting from any damages, injuries, or illness from any and all liability, including any injury to or death of any person, or damage to or destruction of property in or about the premises; defense costs, including attorney's fees and all other fees incidental to defense; loss or damage the City may suffer as a result of claims, demands, costs or judgments against it arising from participation in particular; held on the 24th day of August, 2016, through the 30 day of September 2017.

Antionette Wright
Signature of Applicant

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 24th day of August, 2016, by Antoinette Wright and who is personally known to me or who has produced FDL [redacted] as identification and who did (did not) take an oath.

Jeanne M. Green
Notary Public

Seal: NOTARY PUBLIC STATE OF FLORIDA
JEANNE M. GREEN
MY COMMISSION # FF 178715
EXPIRES: November 28, 2018
Bonded Thru Budget Notary Services

Department	Approved	Denied	Date	Comments:
CD – Zoning:				
Fire:				
Police:				
Risk Management:				
City Council:				

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/25/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Entrust Insurance 1431 Ponce De Leon Blvd Coral Gables FL 33134	**CONTACT NAME:** Jason Bryce **PHONE (A/C, No, Ext):** (305) 265-0112 **FAX (A/C, No):** (305) 265-0101 **E-MAIL ADDRESS:** info@agencyentrust.com
INSURED Lil Bits Academy and Transportation Inc 409 Yearling Cove Loop Apopka FL 32703	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** National Liability & Fire Insurance Company **INSURER B :** **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:						EACH OCCURRENCE	$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
							PRODUCTS - COMP/OP AGG	$
								$
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☒ SCHEDULED AUTOS ☐ NON-OWNED AUTOS	A		73APR325837-01	09/26/2015	09/26/2016	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
							Medical Payments	$ 5,000
	☐ UMBRELLA LIAB ☐ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☐ RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N ☐ If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					☐ PER STATUTE ☐ OTH-ER		
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Vehicle #1 2008 Ford Van - Vin# 1FBNE1L58DB09564 - For both Vehicles City of Apopka is named Designated Insured
Vehicle # 2 2015 Ford Transit Van - Vin# 1FBZX2ZM0FKA27351 - Endorsed to Policy Effective 08/09/16 - Additional Driver: Stella Gregory
Designated Insured: City of Apopka

CERTIFICATE HOLDER

City of Apopka
120 E. Main Street
Apopka, FL 32703

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE


Florida
The Sunshine State
[redacted]
ANTOINETTE ROCELLE
WRIGHT
409 YEARLING COVE LOOP
[redacted]
ORGAN DONOR
SAFE DRIVER
Operation of a motor vehicle constitutes consent to any sobriety test required by law.

INSTRUCTIONS FOR ATTACHING DECAL

1. Clean area where new annual decal is to be affixed.
2. Peel decal from this document.
3. Affix decal in the upper right corner of license plate.

IMPORTANT INFORMATION

SECTION 320.0605, Florida Statutes, states the registration certificate, or true copy of a rental or lease agreement, issued for any motor vehicle must be in possession of the operator or carried in the vehicle while the vehicle is being used or operated on the highways or streets of this state.

SECTION 316.613, Florida Statutes, requires every operator of a motor vehicle transporting a child in a passenger car, van or pickup truck registered in this state and operated on the highways of this state, shall, if the child is 5 years of age or younger, provide the protection of the child by properly using a crash-tested, federally approved child restraint device. For children aged through 3 years, such restraint device must be a separate carrier or a vehicle manufacturer's integrated child seat. For children aged 4 through 5 years, a separate carrier, an integrated child seat, or a child booster seat may be used. For limited exceptions, see Section 316.613, Florida Statutes.

SECTIONS 320.02(5)(a) and 627.733(1)(a), Florida Statutes, requires any owner of a motor vehicle must maintain mandatory Florida personal injury protection and property damage liability continuously throughout the entire registration period; failure to maintain the required coverage could result in suspension of your driver license and registration.

Mail To:
ANTOINETTE ROCELLE WRIGHT
409 YEARLING COVE LOOP
APOPKA, FL 32703-1660

Important note: If you cancel the insurance for this vehicle, immediately return the license plate from this registration to a Florida driver license or tax collector office or mail it to: Dept. of Highway Safety, Return Tags, 2900 Apalachee Parkway, Tallahassee, FL 32399. Surrendering the plate will prevent your driving privilege from being suspended.

CO/AGY 7 / 11 T# 874468910
B# 2988025

FLORIDA VEHICLE REGISTRATION

PLATE [redacted] DECAL [redacted] Expires **Midnight Thu 10/19/2017**

YR/MK	**2008/FORD**	BODY	**BU**	COLOR	**WHI**	Reg. Tax	83.20	Class Code	1
VIN	[redacted]			TITLE	**100498466**	Init. Reg.		Tax Months	24
Plate Type	**RGS**	NET WT	**5809**	GVW	**5999**	County Fee	6.00	Back Tax Mos	0
						Mail Fee	0.75	Credit Class	
DL/FEID	[redacted]					Sales Tax		Credit Months	0
Date Issued	**10/5/2015**	Plate Issued	**9/9/2014**			Voluntary Fees			
						Grand Total	89.95		

ANTOINETTE ROCELLE WRIGHT
409 YEARLING COVE LOOP
APOPKA, FL 32703-1660

IMPORTANT INFORMATION

1. The Florida license plate must remain with the registrant upon sale of vehicle.
2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
3. Your registration must be updated to your new address within 20 days of moving.
4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.

RGS - SUNSHINE STATE

MTRFS020K

INSTRUCTIONS FOR ATTACHING DECAL

1. Clean area where new annual decal is to be affixed.
2. Peel decal from this document.
3. Affix decal in the upper right corner of license plate.

IMPORTANT INFORMATION

Section 316.613, Florida Statutes, requires every operator of a motor vehicle transporting a child in a passenger car, van or pickup truck registered in this state and operated on the highways of this state, shall, if the child is 5 years of age or younger, provide the protection of the child by properly using a crash-tested, federally approved child restraint device. For children aged through 3 years, such restraint device must be a separate carrier or a vehicle manufacturer's integrated child seat. For children aged 4 through 5 years, a separate carrier, an integrated child seat, or a child booster seat may be used. For limited exceptions, see s. 316.613, F.S.

S. 320.0605, F.S., requires the registration certificate, or true copy of a rental or lease agreement, issued for any motor vehicle to be in the possession of the operator or carried in the vehicle while the vehicle is being used or operated on roads of this state.

S. 320.02 and 627.733, F.S., requires personal injury protection and property damage liability to be continuously maintained throughout the registration period. Failure to maintain the mandatory coverage may result in the suspension of your driver license and registration.

Mail To:
ANTOINETTE ROCELLE WRIGHT
C/O ANTOINETTE ROCELLE WRIGHT
409 YEARLING COVE LOOP
APOPKA, FL 32703

Important note: If you cancel the insurance for this vehicle, immediately return the license plate from this registration to a Florida driver license or tax collector office or mail it to: DHSMV, Return Tags, 2900 Apalachee Parkway, Tallahassee, FL 32399. Surrendering the plate will prevent your driving privilege from being suspended.

CO/AGY 12 / 4 T# 919168198
B# 924509

FLORIDA VEHICLE REGISTRATION

PLATE [redacted] DECAL [redacted] Expires **Midnight Sat 12/31/2016**

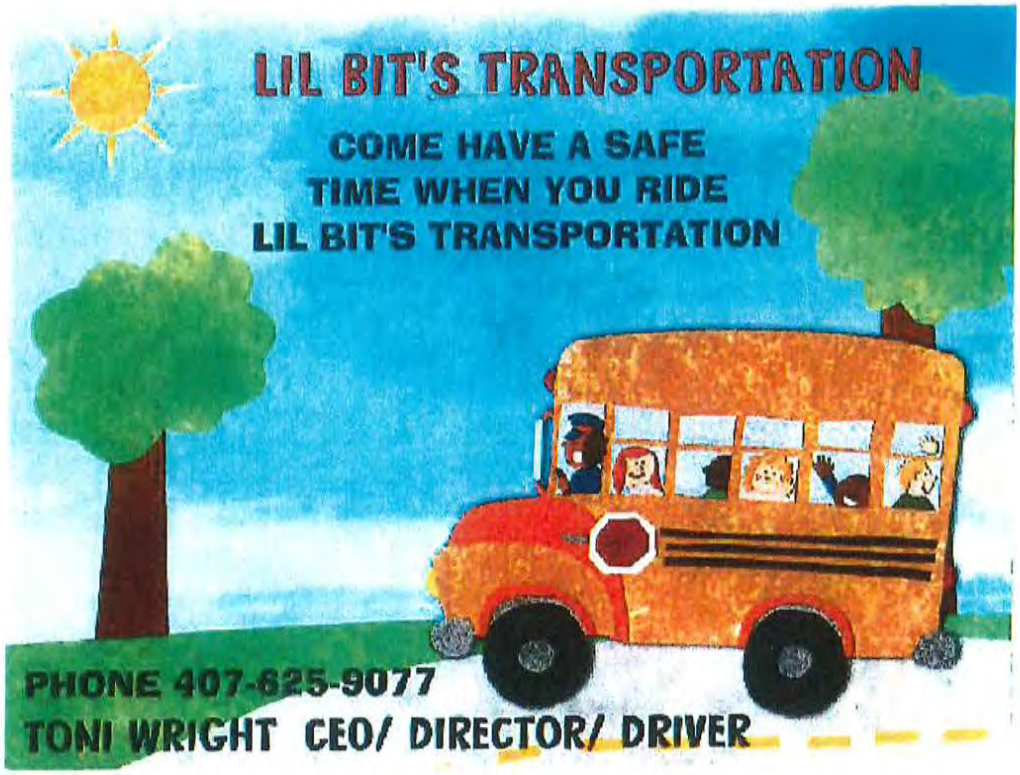
YR/MK	**2015/FORD**	BODY	**VN**	COLOR	**WHI**	Reg. Tax	54.42	Class Code	41
VIN	[redacted]			TITLE	**116977940**	Init. Reg.		Tax Months	5
Plate Type	**RGR**	NET WT	**5878**	GVW	**9000**	County Fee	3.00	Back Tax Mos	
						Mail Fee		Credit Class	1
DL/FEID	[redacted]					Sales Tax		Credit Months	
Date Issued	**8/4/2016**	Plate Issued	**8/4/2016**	TRANSFER:	**X**	Voluntary Fees			
						Grand Total	57.42		

ANTOINETTE ROCELLE WRIGHT
409 YEARLING COVE LOOP
APOPKA, FL 32703

IMPORTANT INFORMATION

1. The Florida license plate must remain with the registrant upon sale of vehicle.
2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
3. Your registration must be updated to your new address within 30 days of moving.
4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.

RGR - FLORIDA REGULAR PLATE ISSUED X



**$5.00 OFF for more than one child.

Field Trip- $120.00-includes up to 4 hrs. of travel time.

Transportation to other after school activities-starts at $10.00 and up.

City of Apopka
Community Development Department
VEHICLE FOR HIRE CHECKLIST

Requirements:

- ☑ Completed Application for Vehicle for Hire Permit w/$10.00 application fee.
- ☑ Name, Address & Phone Numbers of two (2) character and/or business references.
- ☑ Completed Application for the Business Tax Receipt.
- ☑ Copy of Incorporation Certificate; Fictitious Name Registration; or Limited Liability Company (LLC) Registration (https://www.sunbiz.org)
- ☑ Executed and Notarized Hold Harmless Agreement (pending City Approval).
- ☑ **Certificate of Insurance naming the City of Apopka as additional insured in the amount of $1,000,000.** For Information on the particular type of insurance required, please contact City of Apopka Risk Management at 407-703-1805.
- ☑ Applicant must submit a copy of the certificate of insurance, all endorsement pages and a copy of their policy declaration sheet.
- ☑ Copy of State of Florida Commercial Driver's License for each driver.
- ☑ Copy of vehicle(s) registration.
- ☑ Copy of Meter Specification or Rate Schedule if per-hour or trip charge.
- ☐ Approval from Police, Fire, Building, Zoning, and Risk Management (Development Review Committee)
- ☐ City Council Approval (Additional information may be required by City Council.)
- ☐ Once all documentation has been received and approved, each driver must obtain a Vehicle for Hire Permit Badge from the Apopka Police Department. There will be a fingerprint/background check fee of $42.50 for each driver.

FEES:

- ☑ $10.00 Application Fee ~ Paid 8-25-16
- ☑ $42.50 Fingerprint/Background Check Fee per driver Paid 8-25-16
- ☐ $50.00 Vehicle for Hire Permit Badge fee per driver
- ☐ $TBD for Business Tax Receipt *

*The City Business Tax Receipt is separate and will be assessed based upon passenger occupancy and number of fleet vehicles. (City Code Chapter 86)

Backup material for agenda item:

3. Vehicle for Hire Driver - Lil Bit Transportation - Stella Gregory

Community Development Department
120 East Main Street
Apopka, Florida 32703
Phone: 407-703-1712
communitydevelopment@apopka.net

VEHICLE FOR HIRE PERMIT APPLICATION

DRIVER

FILING THIS APPLICATION AND REMITTING THE APPLICATION AND VEHICLE FOR HIRE FEE(S) FOR A CITY VEHICLE FOR HIRE PERMIT DOES NOT ALLOW THE APPLICANT TO OPERATE OR ENGAGE IN ANY TYPE OF BUSINESS, OCCUPATION OR PROFESSION UNTIL A VEHICLE FOR HIRE PERMIT IS ISSUED TO THE APPLICANT. NOTE: THE $10.00 NON-REFUNDABLE APPLICATION FEE IS IN ADDITION TO THE BUSINESS TAX FEE(S).

Business Information	**Owner Information (If corporation, provide corporate officer information)**
Name: Stella Gregory	Name: Antionette Wright
Address: 6220 Rocky Trail	Address: 409 Yearling Cove Lp
Shopping Center: Lil Bits Transportation	City/State/Zip: Apopka, FL 32703
City/State/Zip: Orlando, Fl. 32808	Phone: [redacted] Fax:
Phone [redacted] Fax:	Email Address: [redacted]
Mailing Address (If different than above)	
Street:	
City/State/Zip	

List of Vehicles to be used: See Company App. - Lil Bits Transportation.

Make:	Model:	Tag #:	Color:
Make:	Model:	Tag #:	Color:
Make:	Model:	Tag #:	Color:

Have you ever been convicted of any felony, misdemeanor, or violation of any municipal ordinance? ☐ Yes ☑ No		
If yes, please explain:		
Name/Address/Phone Number of two (2) reliable character/business references:		
Name: Antionette Wright	Address: 409 Yearling Cove Lp.	Phone No.: [redacted]
Name: Pat Clemens	Address: 6223 Rocky Trl, Orl. FL	Phone No.: [redacted]
Federal Tax ID Number (FEI#):	OR	Social Security #: [redacted]
Fictitious Name Registration #:		Corporate Doc #:

INDEMNITY AND HOLD HARMLESS AGREEMENT

THIS AGREEMENT made and entered into this 25TH day of August, 2016, by and between, Stella C. Gregory hereinafter referred to as "Business Owner" and the CITY OF APOPKA, FLORIDA, hereinafter referred to as "The City."

WHEREAS, Stella C. Gregory hereby agrees to indemnify and hold harmless the City and all of the City's officers, representatives, employees, and/or agents arising out of, or resulting from any damages, injuries, or illness from any and all liability, including any injury to or death of any person, or damage to or destruction of property in or about the premises; defense costs, including attorney's fees and all other fees incidental to defense; loss or damage the City may suffer as a result of claims, demands, costs or judgments against it arising from participation in particular; held on the 25TH day of August, 2016, through the 30TH day of September 2017.

Stella C. Gregory
Signature of Applicant

STATE OF FLORIDA
COUNTY OF ORANGE

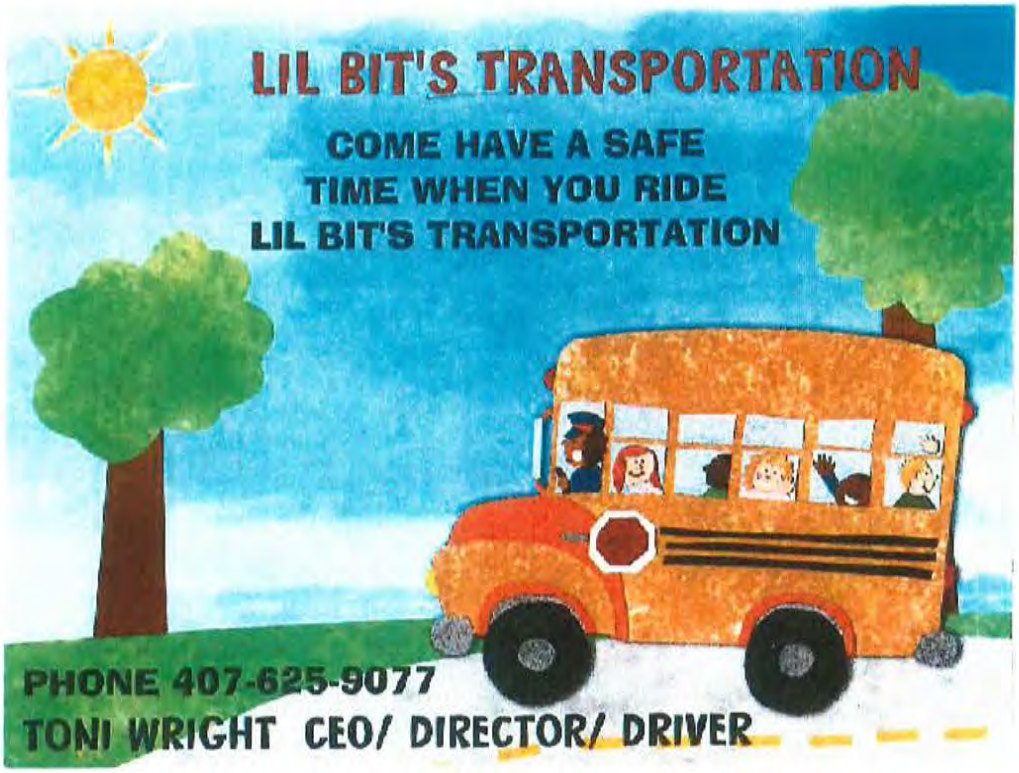
The foregoing instrument was acknowledged before me this 25TH day of August, 2016, by Stella C. Gregory and ~~who is personally known to me~~ or who has produced FDL [redacted] identification and who did (did not) take an oath.

Notary Public

Seal: NOTARY PUBLIC STATE OF FLORIDA JEANNE M. GREEN MY COMMISSION # FF 178715 EXPIRES: November 28, 2018 Bonded Thru Budget Notary Services

Department	Approved	Denied	Date	Comments:
CD – Zoning:				
Fire:				
Police:				
Risk Management:				
City Council:				


Florida
The Sunshine State
CDL CLASS B
[redacted]
STELLA CLYBURN
GREGORY
6220 ROCKY TRL
ORLANDO, FL 32808-1465
[redacted]
SAFE DRIVER
Operation of a motor vehicle constitutes consent to any sobriety test required by law.



**$5.00 OFF for more than one child.

Field Trip- $120.00-includes up to 4 hrs. of travel time.

Transportation to other after school activities-starts at $10.00 and up.

PLANNING & ZONING DIVISION

Date Received:	**Date Approved:**	**Approved By:**
Telephone and/or Mobile Business Only: Yes:	**No:**	**Zoning Est.:**
Legal Description:		
Comprehensive Plan (Land Use)		
Comments:		

Classification Code	Description	Business Tax Number

Notes:	

Fee Type	Fee Amount	Date Paid	Date Issued	Cash Receipt #	Debit/Credit Receipt #	Check #
Application Fee:	10.00	8-25-16			31010	
Background Check/ Fingerprinting Fee:	42.50	8-25-16			31010	
BTR Fee:						
Vehicle of Hire Permit Fee:						
TOTAL:						

Issued by:	

CITY OF APOPKA

Vehicle For Hire

Stella Gregory

Lil Bit's Academy

Organization

The City of Apopka does not endorse the validity, reliability, or merchantability of the product or cause, which this permit allows. Any misrepresentation or irregularity should be reported to the Police Department by calling 407-703-1771.

CITY OF APOPKA

Address: 6220 Rocky Trail
Orlando, FL 32808-1465

[redacted]

This permit does not authorize or imply that the person named and photographed appearing hereon is permitted to solicit in those neighborhoods and/or at those residences that are posted with "No Soliciting" signs.

Date Issued
09-06-2016

Date Expires
09-06-2017

App fee 10.00

Fingerprints/
Background 42.50
fee

8-25-16

CITY OF APOPKA-BUSINESS T
120 E MAIN ST
APOPKA, FL 32703
407-703-1709

Merchant ID: 270156201
Term ID: 1002

Sale

Application Label: VISA CREDIT
VISA Stella
XXXXXXXXXXXX3003 Gregory
AID: A0000000031010
Entry Method: Chip
Apprvd: Online Batch#: 000005
08/25/16 08:45:12

Inv#: 00000001 Appr Code: 025622

Total: $ 52.50

TVR: 8080008000
TSI: 6800

Customer Copy

THANK YOU

City of Apopka
Community Development Department
VEHICLE FOR HIRE CHECKLIST

DRIVER

Requirements:

- [x] Completed Application for Vehicle for Hire Permit w/$10.00 application fee.
- [x] Name, Address & Phone Numbers of two (2) character and/or business references.
- [ ] Completed Application for the Business Tax Receipt.
- [ ] Copy of Incorporation Certificate; Fictitious Name Registration; or Limited Liability Company (LLC) Registration (https://www.sunbiz.org)
- [x] Executed and Notarized Hold Harmless Agreement (pending City Approval).
- [ ] **Certificate of Insurance naming the City of Apopka as additional insured in the amount of $1,000,000.** For Information on the particular type of insurance required, please contact City of Apopka Risk Management at 407-703-1805.
- [ ] Applicant must submit a copy of the certificate of insurance, all endorsement pages and a copy of their policy declaration sheet.
- [x] Copy of State of Florida Commercial Driver's License for each driver.
- [ ] Copy of vehicle(s) registration.
- [x] Copy of Meter Specification or Rate Schedule if per-hour or trip charge.
- [ ] Approval from Police, Fire, Building, Zoning, and Risk Management (Development Review Committee)
- [ ] City Council Approval (Additional information may be required by City Council.)
- [ ] Once all documentation has been received and approved, each driver must obtain a Vehicle for Hire Permit Badge from the Apopka Police Department. There will be a fingerprint/background check fee of $42.50 for each driver.

FEES:

- [x] $10.00 Application Fee - Paid 8-25-16
- [x] $42.50 Fingerprint/Background Check Fee per driver - Paid 8-25-16
- [ ] $50.00 Vehicle for Hire Permit Badge fee per driver
- [ ] $TBD for Business Tax Receipt *

*The City Business Tax Receipt is separate and will be assessed based upon passenger occupancy and number of fleet vehicles. (City Code Chapter 86)