



**CITY OF BRYAN**  
*The Good Life, Texas Style.™*

**2015 APPLICATION FOR NON-EMERGENCY  
TRANSFER SERVICE PERMIT**  
(Must be filed with the City Secretary before December 31)

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Name of Company: \_\_\_\_\_  
Address of Company: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

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- CORPORATION (list name and address of major officers and major stockholders)
- PARTNERSHIP (list name and address of partners)
- SOLE PROPRIETORSHIP (list name and address owner)

<u>Name:</u>	<u>Address:</u>
_____	_____
_____	_____
_____	_____
_____	_____

**DESCRIBE THE NUMBER, MAKE, AND MODEL OF ALL VEHICLES TO BE OPERATED UNDER THIS PERMIT:**

<u>No.</u>	<u>Make</u>	<u>Model</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**FURNISH THE LOCATION FROM WHICH APPLICANT PROPOSES TO OPERATE, DISPATCH AND DISEMBARK THE SERVICE.**

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**FURNISH THE NAMES, ADDRESSES AND QUALIFICATIONS OF ALL DRIVERS:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Age \_\_\_\_\_ TDL# \_\_\_\_\_

**DESCRIBE THE SERVICE TO BE OFFERED UNDER THE PERMIT:**

**Non-emergency transfer service in the Bryan city limits, and emergency transfer to out-of-town locations**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**ATTACH A LIST OF ALL RADIO AND TELEPHONE EQUIPMENT TO BE USED IN THE OPERATION OF THE SERVICE.**

**ATTACH AN ORIGINAL CERTIFICATE OF INSURANCE.**

**ATTACH A SCHEDULE OF RATES TO BE FOLLOWED.**

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I agree to the following and make the following statements as a part of this application.

1. I have not been convicted of a felony or a crime involving moral turpitude within the last five (5) years.
2. I will obtain the necessary permits and have the vehicles operated and equipped as provided in Chapter 773, Subchapter C, Texas Health and Safety Code. Attached are photocopies of such permits.
3. Each emergency vehicle, when in service, shall be accompanied by personnel certified by the Texas Department of Health as required to operate said vehicle under the Texas Health and Safety Code Chapter 773, Subchapter C.

I swear that the above statements are true and correct.

Date: \_\_\_\_\_ Operator: \_\_\_\_\_

**(To be submitted with a \$50 application fee.)**

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, the City of Bryan approved a Nonemergency Transfer Permit for \_\_\_\_\_ (operator) located at \_\_\_\_\_ (address) for the purpose of providing nonemergency transfer service and to operate \_\_\_\_\_ (number) vehicles in the City of Bryan, Texas, commencing on \_\_\_\_\_, 20\_\_\_\_\_, and terminating on \_\_\_\_\_, 20\_\_\_\_\_.

The operator has paid all fees for the applicable fiscal year, furnished a certificate showing the requisite insurance coverage, and complied with all other requirements which are required to obtain this permit.

The operator accepts this permit and agrees to comply with all City ordinances, State and Federal laws.

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

APPROVED:

\_\_\_\_\_  
Mary Lynne Stratta, City Secretary

\_\_\_\_\_  
Operator

\_\_\_\_\_  
Randy McGregor, Fire Chief

APPROVED AS TO FORM:

\_\_\_\_\_  
Janis K. Hampton, City Attorney