In order to begin the process for a Ground Transportation Permit at St. Louis Lambert International Airport, please complete and return the following information as soon as possible.

1. Completed Permit Application signed by a company officer

2. Certificate of Corporate Good Standing for the Missouri Secretary of State’s Office dated within the past 30 days (from the MO Secretary of State Office).

3. Certificate of Registration of Fictitious Name (if applicable).

4. If this is a renewal, a list of Active Prox Cards (last 4 numbers only, see Ground Transportation Permit Renewal Application).

5. A current copy of your certificate of insurance for Automobile and General Liability in accordance with Permit requirements:

   “Description of Operations” section should read exactly: “The City of St. Louis, its Board of Alderman, Airport Commission, officers, employees, and agents are additional insured on the General Comprehensive and Automobile Liability portions of the insurance.

   The “Certificate Holder” portion should read exactly: “City of St. Louis, St. Louis Lambert International Airport, P.O. Box 10212, St. Louis, Missouri 63145.”

Deliver to:
Anna Marie Wingron, MBA
Airport Properties Division
Ground Transportation Permit
10701 Lambert International Blvd.
Room 2501
St. Louis, MO 63145


ST. LOUIS LAMBERT INTERNATIONAL AIRPORT
RENEWAL GROUND TRANSPORTATION PERMIT APPLICATION

New: _____    Renewal: _____ (check one)

Type Permit:

_____ Off-Airport Parking Shuttle (H Tag)       _____ Van Service (G Tag)
_____ Off-Airport Rental Car Shuttle (G Tag)    _____ Charter Bus
_____ Custom Limousine/Livery                   _____ Hotel/Motel Courtesy Vehicle (B Tag)
_____ Vehicle/Premium Sedan (E Tag)             (_____ Public Use)
_____ Other Courtesy Vehicles                  (_____ Flight Crew Use)

Number of Hang Tags Needed ____________

List all active Prox Cards currently in your possession, last 4 digits only. Please note that any Prox card not listed will be deactivated. List can be attached to the application.

<table>
<thead>
<tr>
<th>Permit Active Prox Card Numbers (for Renewals)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

Owner: ________________________________________________
(company legally responsible for the operation of the business)

Business Name (or d/b/a name) ____________________________
(dba or public name, as shown on Registration of Fictitious Name with the Missouri Secretary of State’s Office)

Notice Address _______________________________________
____________________________________________________

Federal Tax I.D. Number ________________________________

Management Company (if applicable) ______________________

Manager/Point of Contact _____________________________ Title __________________

Email Address _______________________________________

Mailing Address ______________________________________

Telephone Number __________________ Fax Number ________________

Local Contact (if different from above) __________________

1
Local Address (if different from above, including email address)________________________

__________________________________________________________

Local Telephone Number (if different from above) _____________ Fax _______________

License Information: (as applicable):

Missouri Certificate of Convenience and Necessity Number __________________________

Federal Highway Administration (old ICC) Permit Number __________________________

US Department of Transportation Number ________________________________

Metropolitan Taxi Commission Premium Sedan Permit _____ Yes _____ No
If yes, Number of Vehicles licensed _______ Number of Drivers licensed _______

Metropolitan Taxi Commission Livery Vehicle Permit _____ Yes _____ No
If yes, Number of Vehicles licensed _______ Number of Drivers licensed _______

Return Application to: Anna Marie Wingron, MBA
Airport Properties Division
Ground Transportation Permit
10701 Lambert International Blvd., Room 2501
St. Louis, MO 63145

If there are any questions, please call the above at (314) 426-8184.

Complete the following Supplemental Schedules if attached.

Fleet Information
Off-Airport Parking Operators
Public Parking Spaces

An Authorized Representative must sign this Application.

_________________________________________  __________________________
Signature                                      Date

_________________________________________
Print Name

_______________________________________
Title
SUPPLEMENTAL SCHEDULE
FLEET INFORMATION

Company Name

Service Provided

Total Number of Vehicles:  
- Sedan _______  Van (6-14 passenger)  _______
- SUV _______  Van (15 or more passenger)  _______

Mark One:

_____ Interstate Transportation - Transportation across state lines

_____ Intrastate Transportation - Transportation within a state.

_____ Inter & Intra State Transportation - Transportation across state lines and within a state.

_____ Courtesy Vehicle

Please list each vehicle a hangtag will be issued to below:

<table>
<thead>
<tr>
<th>Year</th>
<th>Make</th>
<th>Model</th>
<th>License Plate #</th>
<th>Color</th>
<th>Company Owned or Owner Operator</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attached additional pages as needed.
SUPPLEMENTAL INFORMATION

Permittees who offer Airport Parking Only

Name

Number of Public Parking Spaces (including Disabled Spaces)

You will be invoiced on a per space basis for all spaces in accordance with the Airport’s Ground Transportation Rules and Regulations.

Please attach a sketch map clearly showing the number of and location of each Public Parking Space.

If you are a Permittee providing multiple services, one of which is off-Airport Parking (i.e. hotel with off airport parking, rental car location with off airport parking), please provide a description of how the off airport parking spaces are designated and/or segregated:

This Permit Application will become part of your Ground Transportation Agreement upon final approval by the City of St. Louis.