



**The Philadelphia Parking Authority
Taxicab and Limousine Division**

2415 S. Swanson Street
Philadelphia, PA 19148
Telephone: 215-683-9785 Fax: 215-863-9490
Email: TLD@philapark.org

Broker Registration Instructions

This application (BR-1) must be submitted for registration with the Philadelphia Parking Authority in order to be certified as a Medallion Broker for the taxicab and limousine industry in Philadelphia

The minimum requirements are:

1. Applicant must sign an affirmation form provided by the Authority indicating that he or she will comply with the applicable regulations, procedures and orders of the Authority.
2. The applicant shall provide proof from any government authority that he or she is regulated by, that the applicant is in good standing.
3. At least twenty-one (21) years of age;
4. A citizen or permanent resident of the United States;
5. Of good moral character; and
6. Able to speak, read, write and understand the English language.

INSTRUCTIONS TO BE FOLLOWED IN PREPARING AND FILING THE BR-1 APPLICATION (INCOMPLETE APPLICATIONS WILL BE RETURNED).

1. A non-refundable filing fee of \$1,000.00 is required at the time of filing. Applications without the fee will be returned. The filing fee must be paid by certified check or money order to the Philadelphia Parking Authority. Attorney's checks are acceptable.
2. Before filling out the application, please read the attached PPA Regulations.
3. If you need help or have any questions, you may call Charles Milstein, Esq. Assistant to the Director at 215-683-9637.
4. Submit a resume detailing the applicant's work history for the five years preceding the filing of the BR-1 as well as any education or earlier work history that may help clarify your qualifications to be a broker.
5. An original application must be filed in person with the Director of the Taxicab and Limousine Division at the Philadelphia Parking Authority, 2415 S. Swanson Street, Philadelphia, PA 19148

STATEMENT OF FINANCIAL CONDITION

Balance Sheet as of _____.

ASSETS

Current Assets:

Cash _____
Accounts Receivable _____
Notes Receivable _____
Other Current Assets (Specify) _____
Total Current Assets _____

Tangible Assets

Land _____
Office Equipment _____
Less Accumulated Depreciation - _____ = _____
Buildings and Structures _____
Less Accumulated Depreciation - _____ = _____
Investments and Funds (Specify) _____
Intangible Assets _____
Other Assets (Attach Schedule) _____
Total Assets _____

LIABILITIES

Current Liabilities (Liabilities due within one year of date)

Accounts Payable _____
Notes Payable _____
Other Liabilities (Attach Schedule) _____
Total Current Liabilities _____

Long Term Liabilities (Liabilities due after one year of date)

Accounts Payable _____
Notes Payable _____
Other Liabilities (Attach Schedule) _____
Total Long Term Liabilities _____
Total Liabilities _____

Net Worth (Partnerships and Individuals) _____

OWNERS EQUITY (Corporations Only)

Capital Stock _____
Additional Paid-in Capital _____
Retained Earnings _____
Less: Treasury Stock _____
Total Owners Equity _____
Total Liabilities and Owners Equity _____

STATEMENT OF FINANCIAL CONDITION
Income Statement 12 Month Period ending _____.

Revenue and Gains

Operating Revenue _____
Net Revenue (non-carrier operation) _____
Dividend and Interest Revenue _____
Other Non-Operating Revenue _____
Gains _____
Total Revenue and Gains _____

Expenses

Equipment _____
Insurance _____
Employee Salaries _____
Supervisory Salaries _____
Officer Salaries _____

Materials and Supplies

General Office _____
Advertising _____
Telephone _____
Professional Fees _____
Uncollectible Revenue _____
Depreciation _____
Operating Taxes and Licenses _____
Rent _____
Loss _____
Total Operating Expense and Losses _____

Net Income before Taxes _____
Provision for Income Taxes _____
Net Income _____

VERIFICATION

I, _____, hereby state that the facts above set forth are true and correct to the best of my knowledge, information and belief and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. §4904 (relating to unsworn falsification to authorities.)

Date: _____

Signature: _____

Print Name: _____