



PHILADELPHIA PARKING AUTHORITY  
 TAXICAB AND LIMOUSINE DIVISION  
 2415 S. SWANSON STREET  
 PHILADELPHIA, PA. 19148

VEHICLE # \_\_\_\_\_  
 DATE SUBMITTED # \_\_\_\_\_  
 (TO TLD ADM.)

COVID-1 REPLACEMENT VEHICLE – CHANGE OF DISPATCH APPLICATION

A. NAME OF COMPANY \_\_\_\_\_ OWNER \_\_\_\_\_

(MEDALLION COMPANY)

(SIGNATURE OF COMPANY REPRESENTATIVE)

CHANGE DUE TO (CHECK ALL THAT APPLY): ACCIDENT  CHANGE OF DISPATCH   
 OVER MILEAGE  OVER AGE  TRANSFER OF VEHICLE  TRANSFER OF MEDALLION

INSURANCE COMPANY: \_\_\_\_\_ POLICY # \_\_\_\_\_

EFFECTIVE : \_\_\_\_\_ TO \_\_\_\_\_ PA. REGISTRATION # \_\_\_\_\_ EXP: \_\_\_\_\_

(TAG #)

(EXPIRATION)

DISPATCH: \_\_\_\_\_ PREVIOUS DISPATCH: \_\_\_\_\_

NEW or  CURRENT VEHICLE: \_\_\_\_\_ VIN # \_\_\_\_\_  
 (CHECK ONE) ( MAKE MODEL YEAR) (COMPLETENUMBER)

**B. CHANGE OF DISPATCH - to be completed by Dispatch Associations**

Step 1. Have your current Dispatch Association complete the following:

Are dues paid to date? \_\_\_\_ Yes \_\_\_\_ No Date of your notification of change: \_\_\_\_\_

Last day of Membership: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Step 2. Have the Dispatch Association to which you are applying complete the following:

Upon approval of the TLD will the applicant be accepted into your Association?: \_\_\_\_ Yes \_\_\_\_ No  
 Membership to start: \_\_\_\_\_

Date

Has the applicant been informed of the Association's colors, markings and dome light requirements?  
 \_\_\_\_ Yes \_\_\_\_ No Signature: \_\_\_\_\_ Title: \_\_\_\_\_

**C. CHANGE OF DISPATCH REVIEW- Return this completed form to the TLD Customer Service Window; 215-683- 9895**

Change approved: \_\_\_\_ Yes \_\_\_\_ No TLD MGR: \_\_\_\_\_ Date: \_\_\_\_\_

**D. CHANGE OF VEHICLE - to be completed by TLD Staff**

MEDALLION REMOVAL & INSTALLATION APPOINTMENTS FOR CHANGE OF VEHICLES

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

MEDALLION REMOVAL

CHANGE OF VEHICLE INSPECTION  
 \$200.00 PAYABLE TO PPA CREDIT CARD / MONEYORDER

**E. INSPECTION OF TAXICAB COLORS AND MARKINGS – To be completed by TLD Enforcement**

Date of Inspection: \_\_\_\_\_ Approved: \_\_\_\_ Yes \_\_\_\_ No

Inspected by: \_\_\_\_\_ # \_\_\_\_\_ Association Record Updated: \_\_\_\_\_ By: \_\_\_\_\_

**MEDALLION OWNER: DO NOT CHANGE YOUR DISPATCH COLORS UNTIL NOTIFIED BY THE TLD  
 NO CHANGE OF DISPATCH IS VALID WITHOUT FINAL APPROVAL**



