

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 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 \$1,200.00 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. Upon the issuance of a broker registration, the annual fee is also \$1,200.00.
- **2.** Before filling out the application, please read the PPA Regulations relating to brokers at 52 Pa. Code Chapter 1029.
- 3. Per the regulations, a \$50,000.00 bond is required.
- **4.** If you need help or have any questions, you may call TLD Director Heidi Robb at 215-683-9799.
- 5. Submit with this application: (1) a criminal history report; (2) copies of the applicant's driver's license and social security card; and (3) 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.
- **6.** 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.



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Taxicab & Limousine Division

2415 South Swanson Street Philadelphia PA 19148 215-683-9400 tld@philapark.org

Application for Broker Registration

Only individuals may register as a broker.

TELEPHONE NUMBER	IAL SE	AL SI	CURIT	Y NU	MB	ER					
E-MAIL ADDRESS FAX NUMBER CELL PHONE NUMBER U.S. Citizen or permanent residentYN (Attach documentation of citizenship card or residency status and Social Sector If applicant is affiliated with any PPA Certificates of Public Cornumber and carrier type: If applicant is affiliated with any PUC Certificate of Public Cornumber and carrier type IF APPLICANT HOLDS INTERSTATE OPERATING AUTHOMOTOR CARRIER NUMBER ATTORNEY'S NAME											
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escrow accounts for the applicants.

STATEMENT OF FINANCIAL CONDITION

Balance Sheet as of ______.

ASSET	S						
Current	Assets: Cash						
	Accounts I	Receivable	e.				
	Notes Rec						
	Other Curr		s (Specify)				
			ent Assets				
		Total Our	CHI / IOOCIO				
Tangible	Assets Land						
	Office Equ	uipment					
	Less Accu	ımulated E	Depreciation		-	 =	
	Buildings a	and Struct	ures				
	Less Accu	ımulated E	Depreciation		-	 =	
	Investmen	nts and Fu	nds (Specify)				
	Intangible	Assets					
	Other Asso	ets (Attacl	n Schedule)				
		Total Asse	ets				
LIABIL	ITIES						
Current I	<u>iabilities</u> (Accounts I	(Liabilities Payable	due within one yea	r of date)			
	Notes Pay	/able					
	Other Liab	oilities (Atta	ach Schedule)				
		Total Curr	ent Liabilities				
Long Te	rm Liabiliti Accounts I		ties due after one y	ear of date	e)		
	Notes Pay	/able					
	Other Liab	oilities (Atta	ach Schedule)				
		Total Long	g Term Liabilities				
			Total Liabilities				
Net Worth	n (Partnersh	hips and I	ndividuals)				
	S EQUITEY Capital Sto	√ (Corpora					
	Additional		apital				
	Retained E						
		Treasury	Stock				_
			Total Owners Equi	ty			
			Total Liabilities and		Equity		
					1. 9		

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

l,	, hereby state that the facts above set forth are true and	
correct to the best of my kno	eledge, information and belief and that I expect to be able to prove	the
same at a hearing held in thi	matter. I understand that the statements herein are made subject to	the
penalties of 18 Pa. C.S. §490	(relating to unsworn falsification to authorities.)	
Date:	Signature:	
	Print Name:	

BROKER AFFIRMATION

I,signed the	, as an individual have initialed each affirmation and below verification that I have read and understand each of the following:
	Compliance with Criminal Record Regulations: The TLD must be informed immediately if the above individual applicant or any, officer or key employee is convicted or charged of a crime as enumerated in 52 Pa. Code § 1001.10 (relating to definitions – conviction).
	Current Transportation Rights in Good Standing: Any rights that I hold with any regulatory transportation agency are in good standing. I will inform the TLD immediately if any of those rights are no longer in good standing.
	Contact Information: I will maintain and update all contact information with TLD within 48 hours of any change of phone number or addresses or any other contact information.
	Email: I understand that I must maintain a valid email address at all times and am aware that TLD correspondences may be sent via email at any time.
	Insurance: My insurance limits (Bond) shall at least meet the requirements set forth in the TLD regulations. It is my responsibility to make these insurance requirements known to my insurer.
	Awareness of Regulations: I attest that I am aware of the PPA regulations and my obligation to comply with them, including those at 52 Pa. Code Chapter 1029 (relating to Brokers).
	Accuracy: I attest that all the information included in this filing is accurate and complete and that no omissions or commissions have been made that may lead the PPA to issue a broker registration that may not be in the public interest.
able to prov herein are	VERIFICATION, hereby state that the facts above set forth are brrect to the best of my knowledge, information and belief and that I expect to be we the same at a hearing held in this matter. I understand that the statements made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn to authorities.
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