



SARASOTA
BRADENTON
INTERNATIONAL

ONE-TIME PICKUP AUTHORIZATION

OPERATOR NAME: _____
(Company or Individual)

MAILING ADDRESS: _____

CONTACT NAME: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

DATE & TIME OF PICKUP: _____

AIRLINE/FLIGHT ARRIVAL TIME: _____

PERMIT FEE: \$35 PER TRIP FOR EACH VEHICLE

VEHICLE INFORMATION: ☐ Taxi ☐ Sedan/Limousine - #Passengers ☐ 1-5 ☐ 6 or more
☐ Charter or Tour Bus

YEAR	MAKE	LICENSE NO.	VEHICLE ID NO.

A current certificate of insurance is attached.

Operator Signature _____ Date _____

Approved _____