

Louisville Regional Airport Authority
AIRPORT GROUND TRANSPORTATION
OPERATOR PERMIT APPLICATION

Date: _____

All information must be filled out. Operator must complete a separate application for each type of permit. If there are any questions, please call 502-380-8271.

TYPE OF PERMIT	
Charter Bus	
Hotel/Motel Courtesy	
Luxury Limousine	

Company Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Title: _____

E-Mail Address of Contact: _____

Contact Office Number: _____ Cell Phone #: _____

Insurance expiration date: _____ (LRAA additional Insured & \$1 million General Liability)

Fee receipt card or DOT # _____

Complete the information below for each vehicle to be permitted under this Operator Permit. Each of Operator's vehicles engaged in ground transportation services at the Airport may operate only under one type of Operator Permit. Please make sure to review Airport General Transportation 700 rules.

MAKE	MODEL	COLOR	TAG #	VIN #	LRAA #	Paid

If needed, attach the Additional Vehicle Form.

Print Name: _____

Signature of Operator: _____ Date: _____