

## Metropolitan Airport Authority of Rock Island County, Illinois

## TAXI/GROUND TRANSPORTATION/SHUTTLES PERMIT APPLICATION

			1	PERMIT FEE	
FILL OUT COMPLETELY:			-		Annual Permit Fee \$125.00
COMPANY NAME					(Permit Fee is good through 6/30 annually)
NAME.					OPERATING FEE
ADDRESS					Monthly Operating fee \$100.00/month
CITY, STATE, ZIP					
PHONE (Business)		CELL:			
E-MAIL					
				I.	
1) I understand I must ha	ave an annual per	mit to conduct any business	at the Quad City Internation	nal A	Airport and must follow all rules, regulations and guidelines.
	on fee of \$100 per	-			ting fees past due and that repeated late payments will result
3) I understand a violation fee of \$25 per occurrence will be charged for parking in unauthorized areas or blocking a crosswalk.					
4) I understand that payment of a violation fee does not qualify as payment toward a permit or operating fee.					
5) I understand that self-reporting fees are due at the beginning of each month following the end of a quarter.					
6) I understand my company/business is responsible for all fees regardless of who operates (drives) the vehicle.					
7) I understand my certificate of insurance provided to the Metropolitan Airport Authority must be kept current at all times.					
APPLICANT SIGNATURE				DA	TE
Make payment payable to:	Metropolitan Airpo	out Authority		OCC	C H.
	% Accounting Dep				m - Noon
	P.O. Box 9009	i.			om - 4:30 pm
	Moline, IL 61265			•	osed weekends and holidays
	ap@qcairport.com				50000 Contraction (1900) Contraction (1900) Contraction (1900)
	080000 M 1000			Acc	counting Dept: 309-757-1724
** TO BE COMPLETED BY	ACCOUNTING DE	PARTMENT **			
HOTEL/COURTESY SHUTT	Rate	PRMATION Paid		Not	- too
Annual Permit Fee	\$125.00	1 alu		Not	ics
	\$100.00				
Monthly Operating Fee					
	TOTAL PAID:				