

Department of Port Everglades

# **Business Development Division**

1850 Eller Drive • Fort Lauderdale, Florida 33316 • 954-523-3404 • FAX 954-525-1910

Date:							
Re: Crane Service Permit							
Dear Sir or Madam:							
You must obtain a Port Everglades Business Permit in order for your company to conduct business at Port Everglades.							
To obtain a business permit, an applicant must submit the attached application and the required supporting documentation. The application will be reviewed by Port staff and found to be satisfactory, approval signatures will be obtained and a permit will be issued.							
You will not be allowed to operate at Port Everglades until you have an approve business permit. This process may take up to 30 days to complete, so plan accordingly							
Please be aware that:							
<ul><li>Business permits are issued on a calendar year basis and expire December 31.</li><li>Fees are not prorated.</li></ul>							
It is the permit holder's responsibility to keep the Port informed of any changes to the information submitted on the application. Should you have any questions or require assistance, please contact Paula Serpa the Port's Franchise & Business Permit Manager, at (954) 468-0185, or by e-mail at <a href="mailto:pserpa@broward.org">pserpa@broward.org</a> .							
Sincerely,							

Attachments

Jorge Hernández

Director of Business Development



Port Everglades Department Business Development Division 1850 Eller Drive Fort Lauderdale, Florida 33316 954-523-3404 • FAX 954-525-1910

# BUSINESS PERMIT APPLICATION **CRANE SERVICE PERMIT**

1.	Company Name							
	Corporate AddressNumber and Street							
	Number and Street							
			City/State/ZIP			Phone#: (	)	
		City/State/211	Fax #: (	)				
	Type of Ownership:	(	) Sole Proprietorship	(	) Partnership	Number of vegr	a in husinssa	
		(	) Corporation	(	) Joint Venture	Number of year	s in business	<u> </u>
	E-mail address (REQU	JIRE	D)					
2.	Local Contact					Phone#: (	)	
3.	Has the business filed	d for	bankruptcy within the p	ast fi	ve (5) years? Yes_	No		
4.	Has the business ent	ity b	een a party to any litigat	tion v	vithin the last past five (	5) years? Yes	No	
5.	Does the entity have against the business?		owledge of any pending	litiga	tion, violations or legal	claims outstanding	Yes	No
6.			or any of its officers, cted of any state or fede		tors, executives or shanti-trust law?	reholders active in	Yes	No
If y	ou responded "Yes" to	Que	estions 3, 4, 5, or 6, plea	ise ex	kplain fully on a separate	sheet of paper.		
the		the	attached sheet. The a		ort Director or his/her de ation and documents ar			
Bro Cou app App	ward County rules and inty to make any inq dication and attachme	d requiry	gulations now in effect or investigation it deer and authorizes others to that under the laws of	or he ns ap o rele	agrees to comply with all creafter established. In oppropriate to verify or a ease to the county any State of Florida, the inf	addition, the applic augment the inform and all information	ant authorize nation containsought in su	es Broward ined in the uch inquiry.
	Ву:							
	Signature					Company Name	2	
	(Sigr	atur	e Name Typed or Printed)			Title		
	_		Date					



## REQUIREMENTS FOR BUSINESS PERMIT CRANE SERVICE

- 1. Completed business permit application form.
- Completed and signed Port Everglades Business Permit for presentation to the Port Director or his/her designee.
- All business entities must be registered with the State of Florida.
- Copy of current Broward County business tax receipt issued by the Broward County Revenue Division.
- Up-to-date insurance certificate(s) evidencing:
  - Commercial general liability with single limit bodily injury and property damage coverage at \$500,000 per occurrence and \$500,000 per aggregate. Certificate must name Broward County as an "Additional Insured on General Liability Only," and
  - Automobile insurance with combined bodily injury and property damage coverage in an amount not less than: \$300,000 per occurrence. Broward County should NOT be an "Additional Insured" on automobile insurance.
  - Workers' Compensation and Employer's Liability Per Florida State Statute, \$100,000 minimum, each accident.
  - NOTE: These certificates must be addressed to: BROWARD COUNTY, Port Everglades Department, Attention: Business Permit Manager, 1850 Eller Drive, Fort Lauderdale, FL 33316. Cancellation notification should be 30 days.
- 6. A current list of all cranes and equipment owned or leased by the business that will be used at Port Everglades.
- 7. A current quadrennial unit proof test certificate and annual crane inspection certificate for each crane.
- 8. Applicant's most recent financial statement, balance sheet or other financial information that demonstrates creditworthiness, financial responsibility and resources.
- Resume(s) of the applicant's president, vice president, chief financial officer, and local business representative, or a document that reveals the prior work history of the applicant or persons providing services in Port Everglades for the applicant.
- 10. A copy of the applicant's safety and training programs, including substance abuse policies, if any.

### FEES:

- 11. A nonrefundable processing fee of \$300 and an annual fee of \$350 must be remitted with your application<sup>1</sup>. Check should be made payable to: Broward County Board of County Commissioners and be mailed to Port Everglades Business Development Division, 1850 Eller Drive, Fort Lauderdale, FL 33316.
- 12. Required Port Everglades vehicle tag (decal) fee of \$15 per crane. All cranes in service at Port Everglades must have a current Port Everglades decal affixed to the windshield of the crane cab. Decals are issued by the Port's Business Permit Manager upon approval of the permit.

<sup>1</sup> Annual fee is on a calendar year basis and is not prorated. Fees are set through the Port Everglades Tariff and are subject to change at any time.

