

## APPLICATION INSTRUCTIONS:

### COMMERCIAL GROUND TRANSPORTATION PERMIT

#### STEPS

1. Read the Commercial Ground Transportation Policy and the Airport Rules and Regulations.
2. Provide a current copy of each of the required documents.
3. Submit your application and all required documents by either dropping them off in person, scanning and emailing them to the email address below, or by mailing them to the address below.

#### AIRPORT CONTACT

##### ADDRESS:

Attn: Landside Operations  
The Metropolitan Nashville Airport Authority  
140 BNA Park Drive, Suite 520  
Nashville, TN 37214

##### PHONE:

615-275-1657  
615-275-1618

##### WEBSITE:

[www.flynashville.com](http://www.flynashville.com)

##### EMAIL:

[groundtransportation@flynashville.com](mailto:groundtransportation@flynashville.com)

#### PERMIT FEES

Application Fee:

**\$50.00**

Vehicle Registration Fee:

**\$50.00**

\*Vehicle registration fee consists of a Decal Fee of \$5.00, an AVI Transponder Tag Fee of \$25.00 and a Commercial Vehicle Registration Fee of \$20.00 for each Commercial Vehicle to be operated at the Airport.

\*These permit fees will be included on the first invoice the operator receives.



#### REQUIRED DOCUMENTS

- ✓ **Business Tax License**- Obtained from your specific County Clerk
- ✓ **State Business License** - Obtained from the Division of Business Services Department of the State (This is only required for LLCs and Corporations)
- ✓ **Certificate of Public Convenience and Necessity** - Obtained from the Metropolitan Government of Nashville & Davidson County, Transportation Licensing Commission (phone #: 615-862-6777) (Required for operators who provide a "for-hire" service with vehicle capacity of up to 15 persons inclusive of the driver)
- ✓ **Certificate of Insurance (COI)** – All COIs for operators, excluding Class XI and XII, must include a list of all vehicles, make, model, year and VIN number. For Class XI and XII, the COI must cover non-owned autos. All certificates must list "The Metropolitan Nashville Airport Authority, its Board of Commissioners, its officers, and its employees" as an additional insured. All DBAs must be listed, as well. Please refer to Appendix "E" of the Commercial Ground Transportation Policy for more detailed information regarding coverages and requirements.

#### ADDITIONAL INFORMATION

•Once all documents have been received by The Authority you will receive an email at the address that was listed on your application with further instructions. Partial applications will not be accepted. All documents must be under the SAME NAME that you wish to operate as. If, at any time, you change your company name, you will need to re-apply for a permit.

•Make sure that you follow the above steps exactly to prevent process delays. Also, be patient. The time to complete a new permit can be up to 30 days from the date all correct documents are received.

•After the completion of your permit, you will receive an email from our AVI system administrator with details on your Operator Portal. Please follow the steps in this email & become familiar with this tool. It is here that you can update important information & get more detailed trip summaries.

•Once you have been permitted you still have an obligation to provide the Authority with updated documents periodically. This includes notifying the Authority of any change in company name, ownership, address, vehicle, insurance or any other relevant information. Operators who fail to do so will face penalties including fines, suspensions, & permit revocation.

•You may **NOT** under any circumstance operate at the airport without a permit or while you are waiting to be approved.



## THE METROPOLITAN NASHVILLE AIRPORT AUTHORITY COMMERCIAL GROUND TRANSPORTATION APPLICATION

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Document Delivery Option (when available): Electronic or Paper

### CONTACT(S)

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Type of Operation (Per Appendix "D", OPERATOR CLASSIFICATIONS):

Payment Option: Automated Payment or Self-Pay  
(5% discount on AVI trip charges)

Is the applicant a Hotel/ Motel that provides paid off-airport parking to Airport passengers absent an overnight's stay at the Hotel/ Motel?

Yes

No

Note: If yes, in addition to applicable monthly permit fees and trip charges, the Operator shall pay the Authority Ten Percent (10%) of Gross Revenue derived from such parking. In the event the Operator fails to report this information and the Authority subsequently determines the Operator is offering paid parking to Airport passengers who are not overnight guests of the Operator, the Operator shall be assessed Trip Charges applicable to Off-Airport Parking Operators.

Does the operator have an accessible vehicle?

Yes

No

If no, what is the process the operator has in place to provide readily available equivalent service?

The undersigned applicant for a Commercial Ground Transportation Operator Permit agrees to operate within the guidelines of the Commercial Ground Transportation Policy of the Nashville International Airport, Nashville, Tennessee, including Rules and Regulations established and adopted by the Metropolitan Nashville Airport Authority, or as hereafter amended. Any access controls (AVI transponder tags, decals, gate cards, etc.) issued by the Airport Authority remain the property of the Airport Authority and are subject to confiscation. I certify I have received a copy of the above referenced Ground Transportation Policy, and that I have reviewed, and I am familiar with said Rules and Regulations, and that all information provided on this application is true and correct.

**Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Reviewed by MNAA Operations** \_\_\_\_\_

**Approved by MNAA  
Commercial Development** \_\_\_\_\_

Please provide information requested for every vehicle to be permitted using additional copies of these pages as needed. *\*Not applicable to Class XI & XII\**

**Vehicle #1:** Length: \_\_\_\_\_ Width: \_\_\_\_\_

# Seats (Include Driver): \_\_\_\_\_ Vehicle Color: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

State & Tag #: \_\_\_\_\_

VIN#: \_\_\_\_\_

Verified by  
MNAA Rep.

Initials: \_\_\_\_\_

**Vehicle #2:** Length: \_\_\_\_\_ Width: \_\_\_\_\_

# Seats (Include Driver): \_\_\_\_\_ Vehicle Color: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

State & Tag #: \_\_\_\_\_

VIN#: \_\_\_\_\_

Verified by  
MNAA Rep.

Initials: \_\_\_\_\_

**Vehicle #3:** Length: \_\_\_\_\_ Width: \_\_\_\_\_

# Seats (Include Driver): \_\_\_\_\_ Vehicle Color: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

State & Tag #: \_\_\_\_\_

VIN#: \_\_\_\_\_

Verified by  
MNAA Rep.

Initials: \_\_\_\_\_

**Vehicle #4:** Length: \_\_\_\_\_ Width: \_\_\_\_\_

# Seats (Include Driver): \_\_\_\_\_ Vehicle Color: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

State & Tag #: \_\_\_\_\_

VIN#: \_\_\_\_\_

Verified by  
MNAA Rep.

Initials: \_\_\_\_\_

**Vehicle #5:** Length: \_\_\_\_\_ Width: \_\_\_\_\_

# Seats (Include Driver): \_\_\_\_\_ Vehicle Color: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

State & Tag #: \_\_\_\_\_

VIN#: \_\_\_\_\_

Verified by  
MNAA Rep.

Initials: \_\_\_\_\_

**Vehicle #6:** Length: \_\_\_\_\_ Width: \_\_\_\_\_

# Seats (Include Driver): \_\_\_\_\_ Vehicle Color: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

State & Tag #: \_\_\_\_\_

VIN#: \_\_\_\_\_

Verified by  
MNAA Rep.

Initials: \_\_\_\_\_



## THE METROPOLITAN NASHVILLE AIRPORT AUTHORITY ACH (AUTOMATED CLEARING HOUSE) DEBIT FORM

Please complete the entire form in order for funds to be transmitted correctly. The funds will be automatically debited from the account indicated below.

Name: \_\_\_\_\_ Social Security # or Company ID #: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

I (we) hereby authorize THE METROPOLITAN NASHVILLE AIRPORT AUTHORITY (the "MNAA") to initiate debit entries to my (our) account indicated below and the depository named below (the "Bank") to debit the same to such account. I (we) agree that I (we) will be liable to make payment promptly, including any applicable late fees, if any debit is not paid. The authorization is to remain in full force and effect until the MNAA and the Bank have received written notice from me (or either of us) of its termination in such time and in such manner as to afford the MNAA and the Bank a reasonable opportunity to act on it. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Account #: \_\_\_\_\_ Name on Account: \_\_\_\_\_

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Bank's ACH Transit/ ABA Routing #: \_\_\_\_\_

Many depository institutions use different numbers for ACH transactions. Please call the Bank for verification of the correct ACH transit and account number.

Bank Official Contacted: \_\_\_\_\_ Phone #: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date : \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date : \_\_\_\_\_

### FOR INTERNAL USE ONLY:

Vendor#: \_\_\_\_\_ Date set up in system: \_\_\_\_\_ Date prenote sent: \_\_\_\_\_