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PUBLIC SERVICE COMMISSION

Dear Applicant:

Enclosed is a complete packet of the application materials you must file in order to obtain authority from this Commission to operate as a for-hire passenger carrier in intrastate commerce in Maryland. Please contact us, the Transportation Division, at 410-767-8128 for applications for Passenger-For-Hire driver's licenses, which must be completed and filed by any driver(s) who drive vehicles that transport 15 or fewer passengers.

After you have completed the application forms and gathered the required documentation, you may submit your application by mail to the Transportation Division at the address below. If you have any questions about the application process, please call me at 410-767-8183.

You may not operate as a for-hire passenger carrier until you have received written approval from the Public Service Commission and your drivers who drive for-hire vehicles transporting 15 or less passengers have been licensed by this Commission.

If you plan to operate in the Washington Metropolitan area (Washington, D.C., Montgomery and Prince George's Counties in Maryland, and Arlington and Fairfax Counties in Northern Virginia), you must provide proof that you are authorized to do so by the Washington Metropolitan Area Transit Commission (WMATC). You may contact WMATC at 301-588-5260 for an application and information.

For information regarding the legality of providing alcoholic beverages as part of a transportation service, please contact the Comptroller of Maryland's Alcohol and Tobacco Tax Bureau by telephone at 410-260-7314 or by email at att@comp.state.md.us.

Sincerely,

Barbara Wasiljov

Barbara Wasiljov
Administrative Specialist



Operating Authority: Passenger Carrier (except Taxis)

Frequently asked questions when starting a For-Hire transportation business

Company Start-Up

Q: How can I get operating authority for a sedan, van, limousine, charter bus, regular scheduled bus, or bingo service in Maryland?

Submit an *Application for Authority to Operate as a Carrier of Passengers by Motor Vehicles in Intrastate Commerce in Maryland*, along with appropriate documents. Contact the Transportation Division of the Public Service Commission of Maryland at:

6 St. Paul Street, Baltimore, MD 21202, or
mpsc@psc.state.md.us, or
410-767-8128.

Q: How can I become a charter, contract, sightseeing or water taxi (for-hire water vehicle) in Maryland?

Contact the Transportation Division at 410-767-8128 for an application packet and instructions.

Q: What name should I use to file my application?

Your own name, a trade name, or the name of your corporation or limited liability company. Register a trade name or file *Articles of Incorporation for a Corporation* or *Limited Liability Company* with the MD Department of Assessments and Taxation (SDAT) - www.dat.state.md.us.

Q: Once I apply for operating authority, how long is the process?

It is typically between four to six weeks.

Q: Can I start operating my business while I'm waiting to be approved?

No.

Q: Do I need to purchase a vehicle before I am granted approval (operating authority) for my company?

Yes, you must own or lease an insured vehicle before your operating authority can be granted.



Q: If I have a stretch limousine, do I need special documentation?

Yes, submit proof (e.g. odometer disclosure statement or bill of sale) to the Transportation Division that your vehicle is a stretch limousine. A limousine must contain certain specified amenities and modifications (see MVA law Transportation Article 13-939).

Q: Will every person who drives my vehicle for-hire need a Passenger-For-Hire driver's license?

Yes, if the vehicle is designed for 15 or fewer passengers (including the driver), you and any driver will need a **Passenger-For-Hire driver's license**.

No, if the vehicle is designed for 16 or more passengers (including the driver), you and any driver will need a **commercial driver's license** issued by the Motor Vehicle Administration (MVA).

Insurance

Q: I already have personal automobile insurance on my vehicle, do I need commercial insurance?

Yes, your insurance must meet the Maryland Public Service Commission's (PSC) requirements. The minimum insurance requirements for passenger-for-hire vehicles are as follows:

For seating capacity of **7 passengers or less**:

- (a) \$50,000 for injury to any one person, \$100,000 for injuries to two or more persons, and \$20,000 for property damage; or
- (b) \$120,000 combined single limit.

For seating capacity of **8 to 15 passengers**:

- (a) \$75,000 for injury to any one person, \$200,000 for injuries to two or more persons, and \$50,000 for property damage; or
- (b) \$250,000 combined single limit.

For seating capacity of **16 or more passengers**:

- (a) \$75,000 for injury to any one person, \$400,000 for injuries to two or more persons, and \$100,000 for property damage; or
- (b) \$500,000 combined single limit.

Q: Where can I get insurance?

Either a private insurer or the Maryland Automobile Insurance Fund (MAIF) may insure you. Contact the Maryland Insurance Administration (MIA) for a list of insurance companies at www.mdinsurance.state.md.us, or call 410-468-2000 or 1-800-492-6116. Annually, you will need to submit an updated Insurance Certificate showing proof of insurance.

Q: If I am a sole proprietor with only one (1) vehicle and operating the vehicle myself, do I need Workers' Compensation Insurance

No. You will need to complete and sign the form "Exclusion Form - Workers' Compensation Insurance."

Tags and Decals

Q: How do I get for-hire tags for my vehicle?

Submit to the Transportation Division: (1) a *Passenger Vehicle List*, (2) required insurance certificate, and (3) Maryland State Inspection Certificate.

PSC will return to you the stamped Passenger Vehicle List with the appropriate endorsement for the type of tags that MVA is to issue for that vehicle.

Then, take the stamped and approved Passenger Vehicle List (fax copies are not accepted), Maryland State Inspection Certificate and any MVA documents to the MVA to have the appropriate tags issued.

Q: What is a Passenger Vehicle List?

A PSC form (TR-605) that lists the vehicle(s) you plan to operate in your for-hire business.

Q: What else do I need to operate the vehicle(s) for-hire?

A decal from the PSC showing that the vehicle is authorized for-hire. Call the Transportation Division at 410-767-8092, Monday through Thursday (8:30am to 11:00am) to schedule an appointment.

The decal will be issued when your vehicle: (1) is properly marked with company name or logo and unit number, (2) has the required safety equipment and (3) has for-hire tags. The decal will be affixed to your vehicle by PSC staff. Additionally, the vehicle must be inspected twice each year: once by a PSC inspector and once at a certified Maryland State Inspection Facility.



Martin O'Malley
Governor

Anthony G. Brown
Lt. Governor

Operating

Q: Where will I be allowed to operate once I am approved?

You may operate throughout Maryland.

To operate in the Washington metropolitan area (Washington DC, Montgomery and Prince George's Counties in Maryland, and Arlington and Fairfax Counties in Virginia) you will also need authority from the Washington Metropolitan Area Transit Commission (WMATC). For WMATC Authority, call 301-588-5260. Note: If operating ONLY within the area of the WMATC Authority, no PSC authorization is necessary.

Q: Will I be able to operate at BWI Thurgood Marshall Airport once I am approved by PSC?

You may drop off passengers at BWI Thurgood Marshall Airport, but you may not pick up passengers without the required permit from the Maryland Aviation Administration (MAA), 410-859-7298.

Q: Do I need to submit/file my fees for service?

Yes, you must submit a rate sheet listing all fees/rates you will charge. Once your authority has been granted, you may change your rates by filing written notice of any change in fees/rates 30 days in advance of the effective change. You decide what fees/rates you will charge for your services.

Q: What is a rate sheet?

A rate sheet lists charges (called tariffs) that you will charge customers for transportation within Maryland. The rate sheet may specify point to point, mileage, or an hourly rate.

Q: What information must I include on my rate sheet?

- Your rates,
- your name,
- your company or trade name (if applicable),
- your business address, telephone number, date, and
- owner's signature(s).

Maryland Public Service Commission

TRANSPORTATION DIVISION

William Donald Schaefer Tower

6 St. Paul Street, 18th Floor

Baltimore, MD 21202-6806

Phone (410) 767-8128

MD Toll Free 1(800) 492-0474

<http://www.psc.state.md.us>

INFORMATION NEEDED FOR FILING YOUR APPLICATION TO BECOME A CARRIER

- Completed **Application Form**.
- Trade Name** – *If you have a trade name, you must file your trade name with the Maryland Department of Assessments and Taxation (301 W. Preston St., 8th Fl, Baltimore, 410-767-1330 or 1340). OR*
Applicable If
- Corporation** – *If you are filing as a Corporation, you must provide a copy of the Articles of Incorporation and a current Certificate of Good Standing obtained from the Maryland Department of Assessments and Taxation (301 W. Preston St., 8th Fl, Baltimore, 410-767-1330 or 1340).*
Applicable If
- WMATC Certificate Number** - *If you intend to operate in the Washington metropolitan region (Washington, DC, Montgomery and Prince George’s Counties in Maryland, and the two northern counties of Virginia (Arlington and Fairfax) that are contiguous to Washington, DC), you must also apply for authority from the Washington Metropolitan Area Transit Commission (WMATC) and submit PSC a copy of your WMATC Certificate of Authority – Contact Mr. Bill Morrow at (301) 588-5260.*
Applicable If
- Federal Highway Administration Docket Number (DOT Number)** – *If you plan to provide interstate transportation service, contact the Federal Motor Carrier Safety Administration at (800) 832-5660.*
Applicable If
- A **Certificate of Insurance for Automobile Liability Coverage**.
- Evidence of **Workers’ Compensation coverage** OR the signed **Exclusion Form - Workers’ Compensation Insurance**.
- Rate Sheet** – must include:
 - ✓ Name
 - ✓ Trade Name (if applicable)
 - ✓ Company Name (if applicable)
 - ✓ Signature of Business Owner
 - ✓ Address (street, city, state, zip)
 - ✓ Telephone Number
 - ✓ Date
 - ✓ Rates/fees/charges (clearly explained)
- A completed **Passenger Vehicle List** (all for-hire vehicles must be listed).
- Safety Information** – for each vehicle operated:
 - Maryland State Inspection Certificate (less than 90 days old), OR
 - If the vehicle is new (less than 5,000), the Bill of Sale and an Odometer Disclosure Certificate or a Certificate of Origin (both sides). OR
 - If the vehicle is designed to transport 16 or more passengers, you may request a PSC inspection by using the **Vehicle Documentation Required** form.
- A completed **Vehicle Documentation Required** form.
- A completed **List of Driver(s) Who Will Drive For- Hire Vehicles Designed to Seat 15 Passengers or Less** – Those driving for-hire vehicles under 15 passengers, a Passenger For-Hire Driver’s License is required. Call 410-767-8128 for application forms.
Applicable If
- A schedule if applying as a Regular Schedule Passenger Carrier. And/or if you intend to transport passengers to and from bingo halls, a list of participating bingo halls and respective rates.
Applicable If

FYIs: All vehicle parts and accessories shall be in safe and proper operating condition at all times. Vehicles must be without interior and exterior damage. Each vehicle must be equipped with a fire extinguisher (minimum rating of 5 BC) and three (3) roadside reflectors and is identified by a distinctive unit number and the name, trade name, or company logo conspicuously displayed.

Your application cannot be processed until all information has been received. Please allow 4-6 weeks for processing.

STATE OF MARYLAND

PUBLIC SERVICE COMMISSION

COMMISSIONERS

DOUGLAS R.M. NAZARIAN
CHAIRMAN

HAROLD D. WILLIAMS
SUSANNE BROGAN
LAWRENCE BRENNER
THERESE M. GOLDSMITH

TRANSPORTATION DIVISION
WILLIAM DONALD SCHAEFER TOWER
6 ST. PAUL STREET
BALTIMORE, MARYLAND 21202-6806
☎ 410-767-8128 TOLL FREE: 1-800-492-0474

CLIFFORD J. WATTS
DIRECTOR OF TRANSPORTATION

HILARY Y. HAMMERMAN
REGINA C. GEE
ASSISTANT DIRECTOR, ADMINISTRATIONS

FAX: 410-333-6088

APPLICATION FOR AUTHORITY TO OPERATE AS A CARRIER OF PASSENGERS BY MOTOR VEHICLES IN INTRASTATE COMMERCE IN MARYLAND

1. **PLEASE CHECK TYPE OF AUTHORITY APPLYING FOR:**

- CHARTER/CONTRACT PASSENGER CARRIER
Check All That Apply: Bingo Bus Limousine Sedan Van
- REGULAR SCHEDULE PASSENGER COMMON CARRIER

2. **IDENTIFICATION OF APPLICANT/CARRIER:**

Name: _____
(Individual, Partnership or Corporate Name - if a corporation, the name must be stated exactly as the name under which your corporate charter was granted.)

Trade Name: _____
(Attach copy of trade name registration certificate issued by Maryland Department of Assessments and Taxation)

Business Street Address _____ City _____ State _____ Zip _____
Mailing Address _____ City _____ State _____ Zip _____

Telephone No. _____ Fax No. _____ E-Mail address _____

3. **PLEASE CHECK FORM OF BUSINESS OWNERSHIP AND COMPLETE SECTION IN FULL:**

- CORPORATION** Type the name, address and telephone number of the President, Secretary and Resident Agent (who must be a Maryland Resident). *ALSO, SUBMIT A COPY OF THE ARTICLES OF INCORPORATION (ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY) AND A CURRENT CERTIFICATE OF GOOD STANDING FROM THE MARYLAND DEPARTMENT OF ASSESSMENTS AND TAXATION.*

President _____ Date of Birth _____ Social Security No. _____
Address _____ Telephone _____
Secretary _____ Date of Birth _____ Social Security No. _____
Address _____ Telephone _____
Resident Agent _____ Telephone _____
Address _____

- PARTNERSHIP** Type the name, address and telephone number of each partner.

Partner _____ Date of Birth _____ Social Security No. _____
Address _____ Telephone _____
Partner _____ Date of Birth _____ Social Security No. _____
Address _____ Telephone _____

SOLE PROPRIETORSHIP Type the name, address and telephone number of the sole proprietor.

Name: _____ Date of Birth _____ Social Security No. _____

Address _____ Telephone _____

4. PLEASE PROVIDE YOUR INTERSTATE FEDERAL HIGHWAY ADMINISTRATION DOCKET NUMBER (DOT NUMBER), IF ANY: _____ DOT NUMBER _____

5. PLEASE PROVIDE YOUR WASHINGTON METROPLITAN AREA TRANSIT COMMISSION (WMATC) CERTIFICATE NUMBER, IF ANY _____ WMATC CERTIFICATE NUMBER _____

6. INSURANCE INFORMATION:

a. Evidence of Automobile Liability Insurance: Submit an original Certificate of Insurance which includes all information described on the attached list.

b. Evidence of Compliance with Maryland Workers' Compensation Laws:

If you employ drivers, you must provide the policy or binder number _____ and

Name of insurance company _____

OR

If you do not employ drivers, sign the form "Exclusion Form - Workers' Compensation Insurance"

7. SCHEDULES:

a. If you are applying as a Charter/Contract Passenger Carrier, you will receive authority to operate to all points and places within Maryland.

b. If you are applying as a Regular Schedule Passenger Carrier, please attach a copy of your schedule.

c. If you intend to operate to bingo halls, please list them below:

8. **RATES:** Attach a signed and dated copy of your rate sheet listing all rates to be charged in Maryland. This rate sheet must also include your name, address and telephone number as shown on this application. Notification of any change in rates must be submitted by written notice 30 days in advance of the change.

9. **VEHICLES TO BE OPERATED:** Complete the attached Passenger Vehicle List, providing all requested information for each vehicle to be used in providing service in intrastate commerce in Maryland.

The Maryland Public Service Commission requires carriers operating under its authority to adhere to the Commission's rules and regulations governing motor carrier companies. (See Sections 9-201 through 9-207, 4-201 through 4-205, and 5-301 through 5-304 of the Public Utility Companies Article of the Annotated Code of Maryland and Code of Maryland Regulations Title 20, Subtitle 95.01.01 through 95.01.19.) The rules and regulations are available on the Commission's website at www.psc.state.md.us. Failure to adhere to Commission requirements could lead to suspension or revocation of your operating authority.

I hereby certify that the information in this application is true, correct and complete. I also hereby certify that I agree to comply with the Commission's regulations that govern passenger carriers.

Signature of Applicant or Representative

Title of Person Signing

Date

Typed Name of Applicant or Representative

INSURANCE REQUIREMENTS

TAXICABS:

The minimum per accident insurance required for each **taxicab** is \$30,000 for injury to any one person, \$60,000 for injuries to two or more persons, and \$15,000 for property damage.

OTHER PASSENGER VEHICLES:

The minimum per accident insurance required for each motor vehicle with a seating capacity of **seven passengers or less** is:

- (a) \$50,000 for injury to any one person, \$100,000 for injuries to two or more persons, and \$20,000 for property damage; or
- (b) \$120,000 combined single limit.

The minimum per accident insurance required for each motor vehicle with a seating capacity of **eight to 15 passengers** is:

- (a) \$75,000 for injury to any one person, \$200,000 for injuries to two or more persons, and \$50,000 for property damage; or
- (b) \$250,000 combined single limit.

The minimum per accident insurance required for each motor vehicle with a seating capacity of **16 passengers or more** is:

- (a) \$75,000 for injury to any one person, \$400,000 for injuries to two or more persons, and \$100,000 for property damage; or
- (b) \$500,000 combined single limit.

CERTIFICATE OF INSURANCE REQUIREMENTS

If insurance is provided by a private insurer, the Certificate must be on an ACORD or other similar form. If insurance is issued by the Maryland Automobile Insurance Fund (MAIF), the Certificate must be on a MAIF form issued directly from MAIF.

All Certificates must include:

1. The name of the insured exactly as it appears on your PSC application, under which your authority was issued;
2. The Public Service Commission as certificate holder;
3. A statement that, in the event of cancellation, your insurer will give you and the PSC ten (10) days written notice;
4. A list of each vehicle covered, identified by year, make and complete VIN number (either typed on the Certificate or on insurance company letterhead);
5. The limits of liability;
6. The effective and expiration dates of the policy;
7. The name and address of the insurance company and agent (both of which must be licensed by the Maryland Department of Labor, Licensing and Regulation); and
8. The printed or typed name and original signature of the person authorized to sign the Certificate of Insurance.

The Code of Maryland Regulations prohibits all vehicles transporting passengers (20.95.01.18) and all taxicabs operating in Baltimore City and Baltimore County (20.90.02.19) and in Hagerstown and Cumberland (20.90.03.17) from being operated unless the vehicles are insured in accordance with the minimum limits listed above.

VEHICLE DOCUMENTATION REQUIRED

1. Safety Information:

a) For each used vehicle (5,000 miles or more on odometer):

A Maryland State Inspection Certificate dated within the last 90 days.

b) For each new vehicle (less than 5,000 miles on odometer):

A copy of the bill of sale and a copy of the certificate of origin (front and back) may be substituted for the required inspection.

C) If the vehicle is designed to transport 16 or more passengers:

You may request a PSC inspection instead of submitting a Maryland State Inspection Certificate. If you wish to schedule a PSC inspection, please provide a phone number and the number of vehicles to be inspected. Inspections will be scheduled *only after* all other required documentation has been submitted and approved.

This is for those vehicles designed to transport 16 or more passengers.

Yes No Do you need to schedule a PSC inspection?

Yes No Is a records review required?

Phone: _____ Number Of Vehicles _____

2. A Valid Certificate Of Insurance Covering All Vehicle(s) Listed.

PLEASE TYPE OR PRINT LEGIBLY

Applicant/Carrier

Name: _____

Business Address: _____

Inspection Address - - If Address Is Different Than Above:

Signature(s)

(Authorized Representative):

**List of Driver(s) Who Will Drive For-Hire Vehicles
Designed to Seat 15 Passengers or Less
(Please type or print legibly)**

Carrier Name _____

Address _____

Carrier No. _____

Complete the form below and submit it with your completed application packet to:

Public Service Commission
Transportation Division
6 St. Paul Street, 18th Floor
Baltimore, Maryland 21202

My for-hire passenger carrier service currently has _____ drivers who operate vehicles with a passenger capacity of 15 or less. These drivers are:

Name

**Passenger-For-Hire
Driver's License Number**
(NOT the MVA driver's license #)

Signature

Title

Telephone Number

Workers' Compensation Insurance Coverage Requirements

Before the Public Service Commission may issue a license or permit to a passenger for-hire transportation business, the Commission must determine whether the business is required to carry workers' compensation insurance for covered employees in accordance with the Labor and Employment Article §9-206 of the Annotated Code of Maryland.

Employee: Every person performing services for remuneration in the course of the business of an employer. This does not include an independent contractor. An employee is a person who: has been selected and engaged; is paid wages; can be dismissed; is subordinate to the employer; and is engaged in the regular work of the employer.

Independent Contractor: One who contracts to perform certain work for another according to his own means and methods; and is free from the control of the employer in all details connected with the performance of the work except as to its product or result.

The most important factor in deciding whether a person is an employee or an independent contractor is whether the employer has the right to control and direct that person in the manner in which the work is done.

The following types of businesses may elect to carry workers' compensation insurance or may elect to be excluded from coverage: (The business type must be exactly as listed and not modified in any way.)

1. Sole Proprietor: The business is a sole proprietorship with no employees and no intent to hire employees.
2. Partnership: The business is a partnership with no employees other than the individual partners.
3. A Maryland Close Corporation: The business is a Maryland Close Corporation with no employees other than the corporate officers.
4. Limited Liability Company: The business is a Limited Liability Company with no employees other than limited liability company members who own at least 20% of the interest in profits of the company.

If your business is one of the above types, you may elect to carry workers' compensation insurance (contact your agent and provide a Certificate of Insurance to the Transportation Division) or you may elect to be excluded from coverage by completing the attached exclusion form and submitting it with your completed application package.

**TURN PAGE OVER FOR FORM REQUIRING SIGNATURE
IF APPLICABLE**

Exclusion Form - Workers' Compensation Insurance

(Please type or print legibly)

Name of Business or Sole Proprietorship

Names of Owner(s). If a partnership, list each partner's name separately.

Business address	City	State	Zip Code
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Mailing Address, if different from above

Phone number	FEIN or Social Security Number
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The above named business qualifies to be excluded from carrying Workers' Compensation insurance for the following reason: (Check the appropriate box.)

- Sole Proprietorship: The business is a sole proprietorship with no employees.
- Partnership: The business is a partnership with no employees other than the partners.
- Maryland Close Corporation: The business is a Maryland Close Corporation with no employees other than the corporate officers.
- Limited liability Company: The business is a Limited Liability Company with no employees other than limited liability company members who own at least 20% of the interest in profits of the company.

Each officer or member wishing to be excluded from Workers' Compensation insurance coverage must sign this document. NOTE: By signing this document, each officer or member affirms under penalties of perjury that the information contained in this form is true and correct to best of the officer's or member's knowledge, information, and belief.

<i>Typewritten or printed name of Officer or Member electing exclusion</i>	<i>% of ownership</i>	<i>Personal Signature</i>

