

**Instructions for
Per-Trip Commercial Passenger Vehicle Permit
at the
Cincinnati/Northern Kentucky International Airport**

Per-Trip Permits allow access onto the grounds for one pre-arranged pick-up per visit, and cost \$50 for two years, plus \$3 per vehicle when entering the staging lot. (See Operating Procedures)

Note: Please complete the full application and return all applicable pages and all required documents with your check made payable to the Kenton County Airport Board.

REQUIRED DOCUMENTS

- Application Form (must be signed and dated)
- Qualification Statement
- Corporation or Partnership/Joint Venture Statement (if applicable)
- Vehicle Information Sheet (must use KCAB form)
- Certificate of Liability
- Check or money order payable to KCAB

Note: Authorized vehicles are limited to those manufactured to carry a maximum of 14 passengers and are no more than 28 feet in length. For exceptions, see Temporary Permits: Oversize or Unregistered Vehicles.

Note: It is your responsibility to keep the airport advised of any changes to this application, including changes of address, phone, vehicles, license plates, etc.

2. Current Automobile Certificate of Liability Insurance. An original certificate must be included with any new application. (See example in this packet.) Fax copies will only be accepted for insurance renewal or insurance changes. Your application cannot be processed until this is received even if there are no changes to the one currently on file.

- The certificate must show proper liability amounts as required by K.R.S. 281.655
- The certificate must name the Kenton County Airport Board as an additional insured. The Certificate Holder should read: Kenton County Airport Board, Risk Manager, P.O. Box 752000, Cincinnati, OH 45275.

Note: It is your responsibility to provide the airport with a current Certificate of Liability Insurance in the event of renewal, change in coverage, change in insurance company, etc. If your current certificate expires during the permit period, your permit will be revoked if a new certificate is not provided. Reinstatement will only occur once a new certificate is provided and a reinstatement fee of \$10 is paid by check or money order payable to KCAB (no cash).

3. Copy of Bus Permit. Required for all Kentucky registered vehicles manufactured to carry 9 to 14 passengers. Vehicles registered in Ohio and Indiana do not require a Ky. Bus Permit. Permits can be obtained from the Ky. Dept. of Transportation. Call the Boone County scales office at 859-485-6778, or the Kenton County office at 859-356-1111.

APPLICATION PROCESS

1. Mail all required forms and documents along with full payment to KCAB, CPV Coordinator, P. O. Box 752000, Cincinnati, OH 45275. Upon receipt of all paperwork and full payment, your application will be processed. Please allow a minimum of three business days for this to be completed.

2. You will be contacted via phone (listed on your application), when your application has been approved. You will be instructed to report to the Police Department to obtain the valid sticker/permit as indicated below. **Note:** Do not report to the police department until you are notified.

3. The Police Department will conduct vehicle inspections and issue permits Tuesday - Thursday from 8 a.m. to 4 p.m. Upon completing inspection, a new permit sticker will be affixed to driver's side rear bumper. (See example of inspection sheet in this packet.)

Note: Commercial passenger vehicles registered in Kentucky must have a current Bus Inspection Certificate on the front windshield if the vehicle is capable of transporting more than 9 persons (including driver).

OPERATING PROCEDURES

1. The driver enters the Airport and proceeds to the staging lot located between Terminals 2 and 3 (see map). **Note:** This lot is for authorized/stickered commercial passenger vehicles only and is to be used solely as a holding area.

2. Entering the staging area. Those with per-trip permits must deposit \$3 into the mechanism and retrieve an entry ticket, which must be displayed on the driver-side dash while at the airport.

3. The driver parks, meets the pre-arranged passenger in the designated meeting area (see map) and makes arrangements to pick up the passenger at the baggage claim curb. **Note:** There is no parking at the terminal curb. Curb area is for active loading or unloading only. Any vehicle left unattended at curbside, will be towed.

Note: Anyone operating a passenger vehicle without the proper permit/sticker is subject to removal immediately from Airport property and will be cited by the police and prohibited from future operation.

FLEET CHANGES

Adding, removing or replacing vehicles on a permit requires submitting a [vehicle change form](#) available at <http://www.cvgairport.com/biz/permits.html> or by calling 859-767-7824.

TEMPORARY PERMITS:

Oversize* & Unregistered Vehicles

To operate an oversized or unregistered vehicle for a single pre-arranged pick-up, contact the CPV Coordinator at 859-767-7824 (not Airport Police) three business days prior to scheduled date and provide:

- Temporary Permit Application (available at <http://www.cvgairport.com/biz/permits.html>)
- Certificate of Liability Insurance showing the specific vehicle is covered

*Oversize vehicles are those capable of carrying 15 passengers or more and/or are more than 28 feet in length.

Application
for a
Commercial Passenger Vehicle Permit
at the
Cincinnati/Northern Kentucky International Airport

Per-Trip Fee Option

To Be Completed By Applicant:

Company:	
Address:	
Type of business:	Phone:

Permit valid through May 31, 2012

By signing below, I certify that the information contained in this application is accurate and complete, and that I have obtained all applicable licenses, permits and other authorizations necessary to operate at the Cincinnati/Northern Kentucky International Airport.

I also agree to operate and do business at the Airport consistent with all applicable federal, state and local laws, regulations and ordinances and according to the rules and regulations of the Kenton County Airport Board.

Should there be any changes in the information enclosed, I will notify the Kenton County Airport Board immediately. (Phone: 859-767-7824 / Fax: 859-767-3142)

Name: _____ Signature: _____

Job Title: _____ Date: _____

The charge for this option is \$50 per application (plus \$3 per vehicle when arriving at airport for passenger pick-up.)

Mail check or money order (no cash) and all required documentation to: CPV Coordinator, Kenton County Airport Board, P.O. Box 752000, Cincinnati, OH 45275.

Qualification Statement
Commercial Passenger Vehicle Application

1. BUSINESS INFORMATION

A. Name of Firm (exactly as it should appear on agreement):

B. Principal Office Address:

C. Phone #: _____

Fax #: _____

D. Contact Person and Title:

E. Insurance Company Name:

F. Type of Business (check one and complete one of next two pages):

- Partnership
- Joint Venture
- Corporation
- Individual (no additional statement required)

Corporation Statement
Commercial Passenger Vehicle Application

If a Corporation, answer the following:

- A. When incorporated: _____
- B. Where incorporated: _____
- C. Is corporation authorized to do business in Kentucky: Yes No
- D. Corporation held: Publicly Privately
- E. Name, title and address of officers, directors and principal shareholders owning 10% or more of corporation's stock:

<u>Officers</u>	<u>Address</u>	<u>Position</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<u>Directors</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____

<u>Shareholders</u>	<u>Address</u>	<u>% Ownership</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Partnership / Joint Venture Statement
Commercial Passenger Vehicle Application

If a Partnership or Joint Venture, answer the following:

A. Date of Organization: _____

B. General Partnership Limited Partnership

C. Partnership Agreement Recorded: Yes No

Date: _____

Book: _____

Page: _____

County: _____

State: _____

D. State of organization: _____

E. Is partnership authorized to do business in Kentucky: Yes No

F. Name, address and partnership share of each general partner:

<u>Name</u>	<u>Address</u>	<u>% Ownership</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Vehicle Information Sheet

PER TRIP PERMIT
 ANNUAL PERMIT
INSPECTION AUTHORIZED BY:

Company Name: _____

	Vehicle Make	Vehicle Model	Vehicle Year	Vehicle Color	Vehicle Seating Capacity	Vehicle Identification Number (Last 6 Digits)	Vehicle License # or Temporary Plate #	
							State	Number
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

Note: Temporary plate # must be listed

To Be Filled Out By Airport

	Date Inspected	Inspected By	Certificate of Insurance (Period Covered)	Date Fee Received	Date Permit Issued	Annual Permit Number
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Vehicle Information Sheet

PER TRIP PERMIT
 ANNUAL PERMIT
INSPECTION AUTHORIZED BY:

Company Name: _____

	Vehicle Make	Vehicle Model	Vehicle Year	Vehicle Color	Vehicle Seating Capacity	Vehicle Identification Number (Last 6 Digits)	Vehicle License # or Temporary Plate #	
							State	Number
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								
20.								

Note: Temporary plate # must be listed

To Be Filled Out By Airport

	Date Inspected	Inspected By	Certificate of Insurance (Period Covered)	Date Fee Received	Date Permit Issued	Annual Permit Number
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

PROLIER	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
						MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$
						PRODUCTS - COMP/OP AGG	\$
		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						PROPERTY DAMAGE	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				- EA ACCIDENT	\$
						EA ACC	\$
						OTHER THAN AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS	OTH-ER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
		OTHER					

SAMPLE FORM

To Be Filled Out By Insurance Agent

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

* Unless "any auto" is checked above, you must list vehicles covered by the policy, including make, model and VIN.

CERTIFICATE HOLDER <p>KCAB must be named in this space as an additional insured party as follows:</p> <p>Kenton County Airport Board, Risk Manager Cincinnati/Northern Kentucky Int'l Airport P.O. Box 752000 Cincinnati, OH 45275</p>	CANCELLATION <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.</p> <p>AUTHORIZED REPRESENTATIVE</p>
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COMMERCIAL PASSENGER VEHICLE INSPECTION SHEET

<input type="checkbox"/>	PER TRIP PERMIT
<input type="checkbox"/>	ANNUAL PERMIT
<input type="checkbox"/>	TEMPORARY PERMIT

COMPANY: _____

VEHICLE MAKE: _____ VEHICLE YEAR: _____ TYPE: _____

LICENSE PLATE: _____ LAST 4 of VIN _____ STATE: _____

	PASS	FAIL	COMMENTS	DATE CORRECTED
VALID REGISTRATION RECEIPT			EXP: _____	_____
PROOF OF INSURANCE			_____	_____
KY BUS PERMIT (KY Vehicles ONLY) ¹			_____	_____
TIRES (TREAD WEAR)			_____	_____
MIRRORS (MISSING/CRACKED)			_____	_____
HEADLIGHTS (LOW/HIGH BEAM)			_____	_____
TURN SIGNALS (FRONT)			_____	_____
TURN SIGNALS (REAR)			_____	_____
BRAKE LIGHTS			_____	_____
BACKUP LIGHTS			_____	_____
WINDSHIELD WIPERS			_____	_____
HORN			_____	_____
WINDSHIELD/WINDOWS			_____	_____
EXHAUST (NOISE/LEAKS)			_____	_____
STEERING (CHECK FOR PLAY)			_____	_____
BRAKES (GOOD PEDAL)			_____	_____
CLEANLINESS/BODY CONDITION			_____	_____
DRIVER'S OLN VERIFIED			_____	_____

SAMPLE FORM
To Be Filled Out By Airport Police

GENERAL CONDITION (OPTIONAL)

INSPECTED BY: _____ DATE: _____

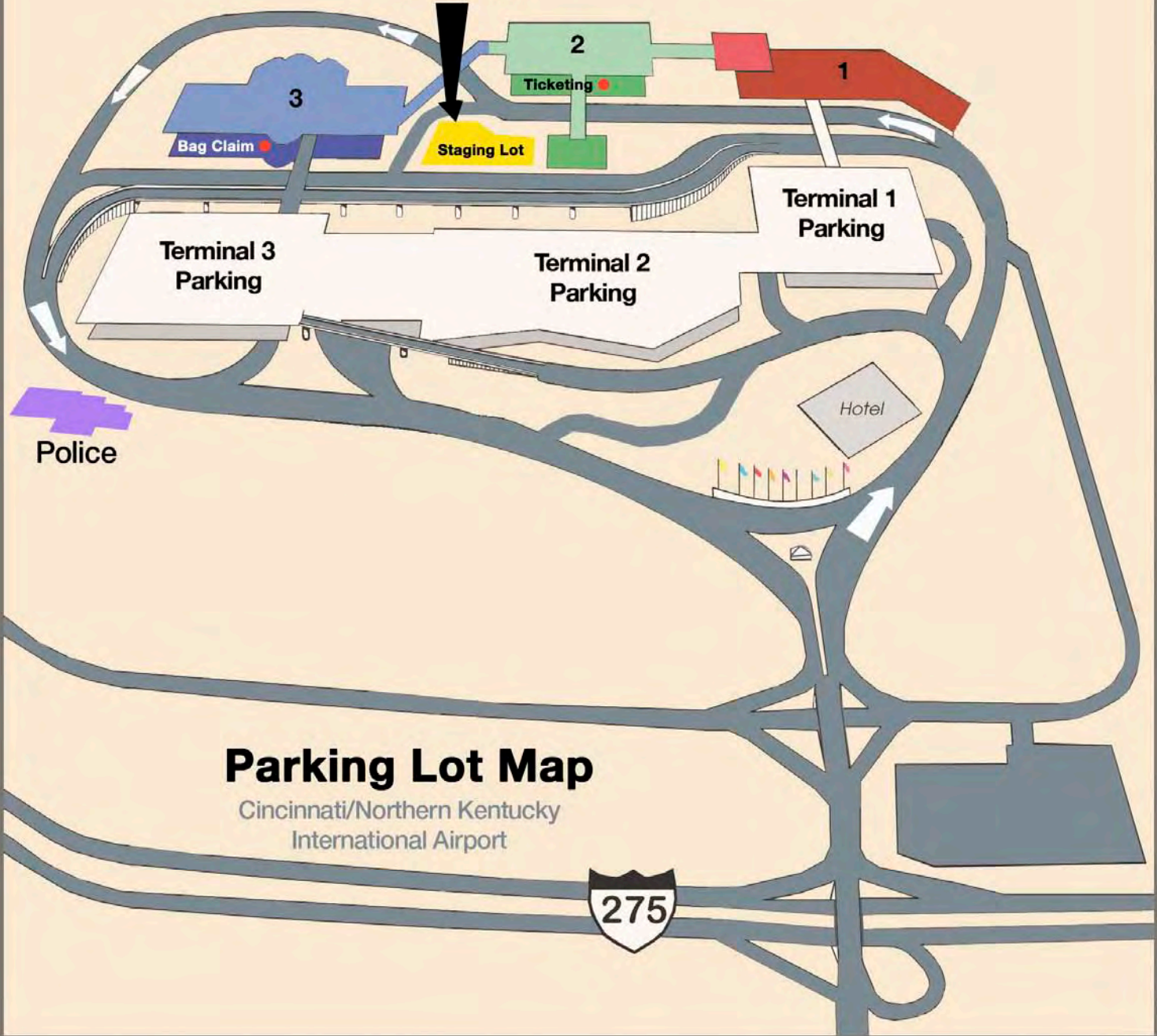
2ND INSPECTION (IF NEEDED)

INSPECTED BY: _____ DATE: _____

PERMIT NUMBER ISSUED	
PER TRIP PERMIT #	_____
ANNUAL PERMIT #	_____
Original placed in Courtesy Vehicle Bin	

¹ If designed to carry more than nine – including the driver

**Commercial
Passenger
Vehicles**



**Terminal 3
Parking**

**Terminal 2
Parking**

**Terminal 1
Parking**

2

Ticketing

3

Bag Claim

Staging Lot

1

Hotel

Police

Parking Lot Map

Cincinnati/Northern Kentucky
International Airport

