

Hillsborough County Public Transportation Commission  
Rule Change Proposal

I request that the Commission consider the following change to its Rules for Taxicabs, Limousines, Vans, Handicabs and BLS Ambulances:

Current Rule as Written:

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Proposed Rule with Changes:

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

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

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

Your association with the industries (driver, owner, passenger, concerned citizen, other): \_\_\_\_\_

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

Do not write in this block

Date Received _____
Received By _____