

Shanelle N. Hayes

From: WMATC E-Filings
Sent: Monday, January 10, 2022 1:15 PM
To: WMATC carrier filings
Subject: 2022 Annual Report - WMATC No: 1664, Carrier Name: Z VIP Sedan & Limousine Services, Inc.

Washington Metropolitan Area Transit Commission
2022 Carrier Annual Report Form

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2022, must file a complete 2022 annual report and pay a \$175 annual fee on or before **January 31, 2022**. To be timely, the report and fee must be received at the WMATC office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (*) must be completed. If any information is missing or incorrect, make necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a \$150 late fee. Each carrier that fails to pay the \$175 annual fee on time will be assessed a separate **\$150 late fee..**
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2022.
- Filing an annual report containing false information, or omitting information, may result in a civil forfeiture.
- Make check or money order payable to WMATC. WMATC does not accept cash.

Read the accompanying instructions carefully before completing this form.

1. ANNUAL REPORT OF:

WMATC No.: 1664

Name of Carrier (as shown on certificate of authority): Z VIP Sedan & Limousine Services, Inc.

Trade Name: Z Limo

Principal Place of Business

Street Address: 6188 Oxon Hill Rd

Apt./Suite: 604

City: Oxon Hill

State: MD

Zip: 20748

Mailing Address (if different from street address)

Street:

Apt./Suite:

City:

State:

Zip:

Telephone Number: (301)899-1060

Other Telephone:

Fax Number:

E-mail: zchano@z-limo.com

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

USDOT No.:

DC DFHV No.:

Virginia DMV passenger carrier No.: 822

Maryland PSC No.: 4048

3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Name: Zan Chano

Title: Vice President

Telephone Number: (301)899-1060

Other Telephone:

Fax Number:

E-mail: zchano@gmail.com

4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

Name of Registered Agent for Service of Process:

Agent Address:

Apt./Suite:

City:

State:

Zip:

Telephone Number:

E-mail:

5. *CHANGES: Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

6. *LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS: (1) list your vehicles below or (2) upload a complete vehicle list to this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

Fleet No.	Year*	Make*	Vehicle VIN*	License Plate*	State*	Seating Cap.*	Wheel Chair
867	2020	Lincoln	1In6I9hk7I5602604	65587B	MD	5	No
868	2020	Lincoln	1LN6L9HK8L5602806	66013B	MD	5	No
869	2020	Lincoln	1LN6L9HK0L5603769	66015B	MD	5	No
870	2020	Lincoln	1In6I9hk5I5603766	66010B	MD	5	No
585	2016	Mercedes Benz	WDAPF1CD7GP346066	10569P	MD	15	No
809	2021	Ford Expedition	1FMJK1JT0MEA59552	55182B	MD	7	No
812	2021	Chevrolet Suburban	1GNSKCKD5MR463846	55183B	MD	7	No
865	2019	Cadillac XTS	2G61U5S31K9102397	64425B	MD	5	No

***Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.**

7. *CERTIFICATION:

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Name: Zan Chano
Title: Vice President
Date: 01/10/2022