



GEORGIA DEPARTMENT OF PUBLIC SAFETY  
MCCD REGULATIONS COMPLIANCE  
P.O. BOX 1456  
ATLANTA, GEORGIA 30371  
Phone: (404) 624-7243  
[www.gamccd.net](http://www.gamccd.net)

## Ride Share Network Logo Submittal Form

This form is for Ride Share Companies who have registered with the Department of Public Safety's For-Hire Transportation Program.

### INSTRUCTIONS FOR SUBMITTALS

1. All forms must be mailed to The Department to the address listed on form. **Walk-ins will not be accepted.** *\*There is currently a two (2) week processing period\**
2. Please complete and sign form. INCOMPLETE forms will be returned to applicant. **Please type application or print legibly.**
3. **Forms must be accompanied with a model of company's proposed signage or logo.**
4. Company's signage or logo must meet the following conditions stated in O.C.G.A §40-1-195(b) and O.C.G.A §40-1-197:
  - Sufficiently large and color contrasted to be readable during daylight hours from a distance of at least 50 feet. **(Minimum size of logo or signage should be no less than 4 ¾ by 4 ¾)**
  - Must be reflective, illuminated, or otherwise visible in darkness
  - Sufficient to identify a vehicle as being associated with the ride share network service with which the ride share driver is affiliated.

Written notification will be sent to applicant advising the status of applicant's submission.

If signage or logo submittal is approved by the Department; applicant must ensure that each ride share driver-(employed or contracted with company), displays the company's **approved logo or signage** on their vehicle at all times while active on the company's digital network.

**Any person who violates the terms and conditions stated in O.C.G.A §40-1-195 shall be guilty of a misdemeanor**



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**RIDE SHARE NETWORK EXAMPLE OF LOGO OR SIGNAGE**



Company's signage or logo must meet the following conditions:

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**Ride Share Network Logo Submittal Form**

<b>Owner's Name</b>			
<b>Business Name:</b> <i>(list DBA in this field)</i>			
<b>Business Address</b> <i>(physical address)</i>	Street Address		
City:	State:	Zip Code:	
<b>Mailing Address</b> <i>(if different from above)</i>	Street Address:		
City:	State:	Zip Code:	
<b>Passenger ID#:</b>	<b>Business Phone Number:</b>	<b>Secondary Contact Number:</b>	
<b><u>Logo/Signage Specifications</u></b>			
<b>Material:</b>	<b>Color:</b>	<b>Measurements:</b>	
<b>Detailed Description of Logo/Signage</b> (additional documentation can be attached):			

**Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_