

**29. COMPLIANCE CERTIFICATION:**

ALL MOTOR PASSENGER CARRIER APPLICANTS must certify as follows:

*Applicant is fit, willing, and able to provide the proposed operations and to comply with all pertinent statutory and regulatory requirements, including the U.S. Department of Transportation's Americans with Disabilities Act regulations for over-the-road bus companies located at 49 CFR Part 37, Subpart H, if applicable.*

☐ YES

Private entities that are primarily in the business of transporting people, whose operations affect commerce, and that transport passengers in an over-the-road bus (defined as a bus characterized by an elevated passenger deck over a baggage compartment) are subject to the U.S. Department of Transportation's Americans with Disabilities Act regulations located at 49 CFR Part 37, Subpart H. For a general overview of these regulations, go to the Federal Motor Carrier Safety Administration's Web site at [www.fmcsa.dot.gov/rules-regulations/bus/company/ada-guidelines.htm](http://www.fmcsa.dot.gov/rules-regulations/bus/company/ada-guidelines.htm).

**30. PLEASE ENTER NAME(S) OF SOLE PROPRIETOR, PARTNERS, OR OFFICERS AND TITLES**

*(e.g., president, treasurer, general partner, limited partner)*

1. Victor Eloy Lara, President

2. \_\_\_\_\_

*(please type or print names)*

**31. CERTIFICATION STATEMENT** *(to be completed by authorized official):*

I, Victor Eloy Lara, certify that I am familiar with the Federal Motor Carrier Safety Regulations and/or Federal Hazardous Materials Regulations. Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct, and complete.

Signature: \_\_\_\_\_

Victor Eloy Lara

Title: \_\_\_\_\_

President

*(please type or print)*

Date: 07/20/2020