

[] NEW
 [X] RENEWAL

**CITY OF LA CROSSE
 APPLICATION FOR
 PEDICAB AND/OR PEDAL CAR**
 (Ch. 10, Article XVIII)

Fee: \$ 60.00
 Invoice No. 174411
 Cust # 200361

20-1641

For the license period beginning January 1st 20 21 ;
 ending December 31st 20 21 .

To the Honorable Mayor, Common Council, City Clerk and Chief of Police of the City of La Crosse:
 The undersigned hereby makes application for a Pedicab and/or Pedal Car License.

| | |
|--|--|
| BUSINESS NAME | RiverTown Pedal Tours, LLC |
| BUSINESS ADDRESS | N7304 County Road HD, Holmen, WI 54636 |
| BUSINESS TELEPHONE | 608-799-2493 |
| VEHICLE STORAGE ADDRESS | N7304 County Road HD, Holmen, WI 54636 |
| PEDAL CAR DEPOT/TERMINAL(S) <i>(Property owner permission required)</i> | La Crosse Distilling Co. |

| | | |
|--|---|--------------|
| OWNER(S) NAME <i>(First, Full Middle, Last)</i> | Scott Kenneth Gumz & Kimberly Dawn Gumz | |
| OWNER(S) DATE OF BIRTH | 5/23/1966 | 9/22/1967 |
| OWNER(S) ADDRESS | N7304 County Road HD, Holmen, WI 54636 | |
| OWNER(S) TELEPHONE | 608-792-8676 | 608-386-1264 |

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? [] YES [X] NO
 HAVE YOU BEEN CONVICTED OF AN ORDINANCE VIOLATION? [] YES [X] NO

IF EITHER ANSWER IS YES, INCLUDE DATE, NATURE OF THE OFFENSE AND PLACE OF CONVICTION.

| | |
|--|--------------------|
| INSURANCE CARRIER | AXIS Insurance Co. |
| POLICY NUMBER | 84-4787021 |
| POLICY LIMITS <i>(min. \$2,000,000 liability)</i> | 2,000,000 |

| | |
|-----------------------------------|---|
| NUMBER OF VEHICLES TO BE LICENSED | 1 |
|-----------------------------------|---|

| DESCRIPTION OF VEHICLE <i>(Brand, Model, Body Style)</i> | CAPACITY <i>(incl. driver)</i> | SERIAL NUMBER |
|---|-----------------------------------|------------------|
| Trident Party Bike, Savannah | 16 | 1FTYR14U91A95050 |
| | | |
| | | |

ATTACH SCHEDULE OF RATES.

****NO CHANGES MAY BE MADE TO RATES WITHOUT PRIOR COMMON COUNCIL APPROVAL.**

ATTACH PROPOSED ROUTES FOR PEDAL CAR TOURS.

****NO CHANGES MAY BE MADE TO ROUTES WITHOUT PRIOR COMMON COUNCIL APPROVAL.**

ATTACH WRITTEN AUTHORIZATION FROM THE PROPERTY OWNER OF ANY ASSEMBLY SITE USED FOR A PEDAL CAB TOUR.

****MUST BE A COMMERCIAL LOCATION ON PRIVATE PROPERTY.**

ATTACH ORIGINAL CERTIFICATE OF INSPECTION FOR EACH VEHICLE CERTIFYING THAT THE VEHICLE TO BE USED FOR HIRE IS IN GOOD MECHANICAL CONDITION.

****THE INSPECTION MUST BE COMPLETED BY A REPUTABLE BICYCLE TECHNICIAN (other than owner).**

ATTACH A CERTIFICATE OF INSURANCE IDENTIFYING ALL INSURED VEHICLES BY BRAND, MODEL AND SERIAL NUMBER.

****SAID POLICY MUST BE ENDORSED IDENTIFYING THE CITY OF LA CROSSE AS ADDITIONAL INSURED.**

ATTACH A PHOTOCOPY OF THE BICYCLE REGISTRATION FOR EACH VEHICLE.

I hereby attest that the information contained in this application is true and correct. I am aware that withholding information or making false statements on this application will be basis for denial/revocation of license. I further certify that the above vehicles will be kept in good mechanical condition at all times and I will comply with the provisions of law pertaining to pedicabs and pedal cars (Ch. 10, Article XVIII of the La Crosse Municipal Code).

SIGNATURE OF APPLICANT

DATE

11/13/20

APPROVAL OF MUNICIPAL AUTHORITY

Upon investigation of statements made on application and municipal and state criminal records, license is hereby:

APPROVED DENIED

Signature of Police Department Representative & Date

The issuance of a Pedicab or Pedal Car License is conditional at all times. A license may be revoked or suspended when necessary to protect the public health, safety or welfare, to prevent a nuisance from developing or continuing, in emergency situations or due to noncompliance of this section, the Municipal Code of Ordinances or applicable state or federal laws.

TO BE COMPLETED BY CLERK

| | | | |
|---------------------------------|--------------------------|----------------------|-----------------------|
| Date filed with municipal clerk | Date reported to Council | Date license granted | License number issued |
| | | | |

November 30 2020

Nikki Elsen
Deputy City Clerk

RE: 2021 Trolley Party Renewal

Hi Nikki, I hope this finds you well & warm.

Enclosed is most of the info for our renewal.
I will get you the updated Insurance information when it renews in May.

We are waiting on confirmation from both/either Jayme and Ron at the new restaurant going in at the Holiday Inn and the 4 Sisters for possibly a new start/drop location for the bike. Both are very interested but have not committed. The La Crosse Distilling Co. unfortunately was not as popular of a stop as we had hoped with our customers. The routes will be very similar to 2020 with the exception of the start/stop location.

Even though it was an obvious slow start for this business, we are excited for the future of Trolley Party LaCrosse and our downtown partnerships. We were received very well and had many positive comments and inquiries on our tours this Summer. The addition of the Paddle Party Boat may be on hold for another year, but still in the works!

If you have any other questions or concerns, please call or email anytime.
Thank you again for all of your help.

Sincerely,



Scott. K. Gumz
Owner
Rivertown Pedal Tours LLC



River Town Pedal Tours Trolley Party schedule & Rates:

Trolley Party Bike tours will begin at The La Crosse Distilling Co. where a brief orientation will be given by the Conductor before the tour sets out.

Most tours will take us first through Riverside Park. then stop for a 20 minute break at 4 Sisters Tappas. If you would like food, we will place a preorder while driving through the park. We'll then head up to 3rd St. and make 1 or 2 more stops in the Historical La Crosse Riverside area, then back to The La Crosse Distilling Co.. Tours last 2 hours, and we will pedal close to 2 miles round trip. FREE Water will be provided during the tours.

(See Map Enclosed)

Other Tours include:

Saturday and Sunday mornings: 12:30 Bloody Tours

Thursdays 6pm: Moon Tunes Tour

Tour Time Slots

Sunday: 12:30pm - 2:30pm, 3:00pm - 5:00pm, 5:30pm - 7:30pm, 8-10p

Monday: Closed

Tuesday: 1:00pm - 3:00pm, 6:00pm - 8:00pm, 8:00pm - 10:00pm

Wednesday: 1:00pm - 3:00pm, 6:00pm - 8:00pm, 8:00pm - 10:00pm

Thursday: 1:00pm - 3:00pm, 6:00pm - 8:00pm, 8:00pm - 10:00pm

Friday: 1:00pm - 3:00pm, 6:00pm - 8:00pm, 8:00pm - 10:00pm

Saturday: 12:30pm - 2:30pm, 3:00pm - 5:00pm, 5:30pm - 7:30pm, 8:00pm - 10:00pm

Rates:

Weekday Tour (Sunday - Thursday)

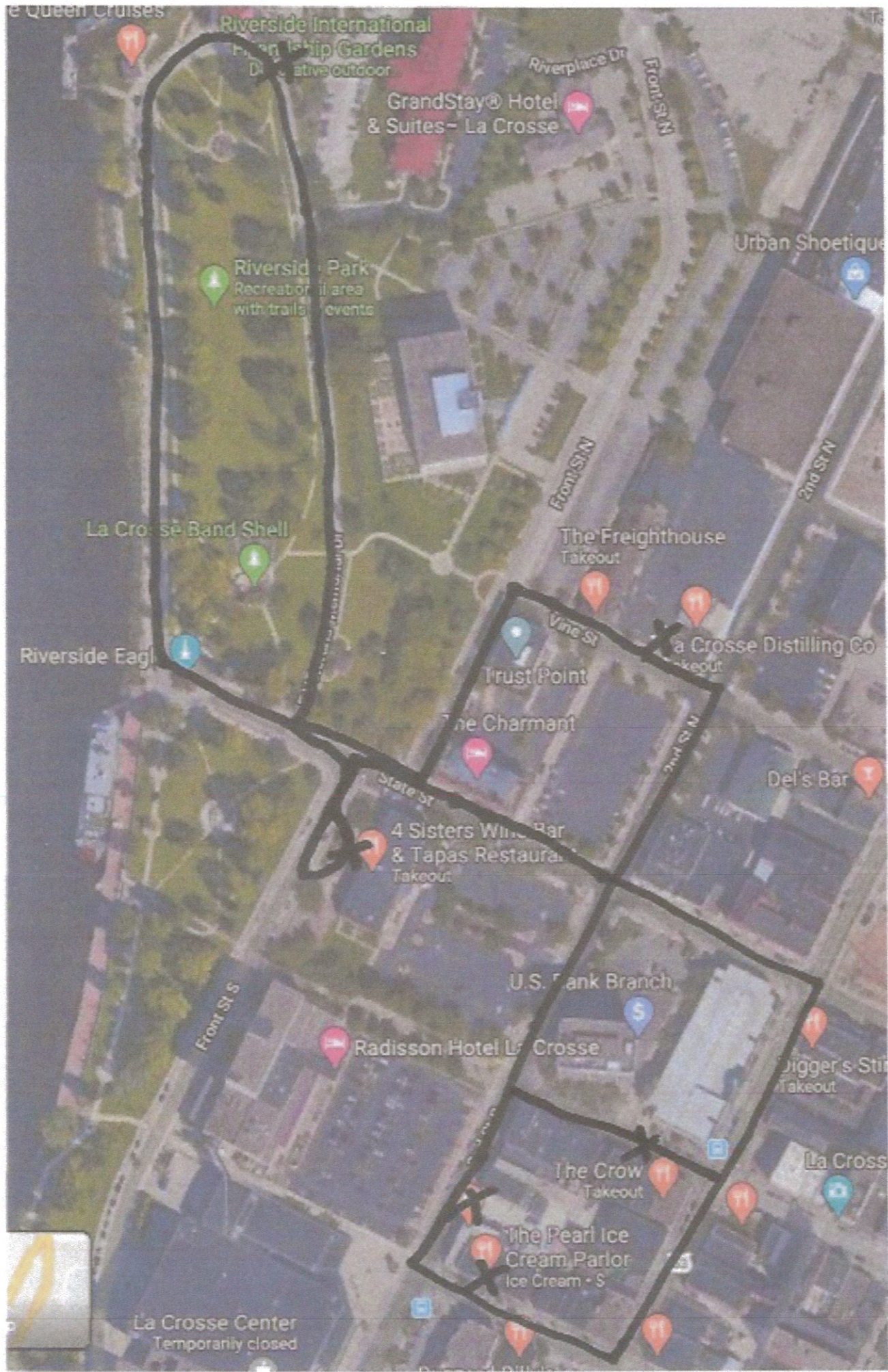
\$349.00

Tax included

Weekend Tour (Friday / Saturday)

\$399.00

Tax included



Queen Cruises

Riverside International
Ship Gardens
Diverse outdoor

GrandStay® Hotel
& Suites - La Crosse

Urban Shoetique

Riverside Park
Recreation area
with trails events

La Crosse Band Shell

Riverside Eagle

The Freighthouse
Takeout

Trust Point

The Charman

Del's Bar

4 Sisters Wine Bar
& Tapas Restaurant
Takeout

U.S. Bank Branch

Radisson Hotel La Crosse

Jigger's Still
Takeout

The Crow
Takeout

The Pearl Ice
Cream Parlor
Ice Cream - S

La Crosse Center
Temporarily closed

CERTIFICATE OF INSPECTION

NAME OF BUSINESS RiverTown Pedal Tours, LLC

ADDRESS N7304 County Road HD, Holmen, WI 54636

BICYCLE BRAND Trident Party Bike MODEL Savannah SERIAL _____

Per Municipal Code Sec. 10-872, each bicycle shall be kept and maintained in a safe and reliable condition. To insure the safe condition of all bicycles, applicant/licensee must present to the City Clerk a certificate of inspection as to the mechanical condition of the bicycle from a reputable bicycle technician (other than bicycle owner).

| | GOOD CONDITION/ NO REPAIR NEEDED | NEEDS REPAIR | DATE OF REPAIR |
|--|-------------------------------------|--------------|----------------|
| HEADLIGHT <i>Capable of projecting a beam of white light for a minimum distance of 300 hundred feet in darkness.</i> | <u>✓ SA</u> | _____ | _____ |
| TAIL LIGHT <i>Visible for a distance of at least 500 feet from the rear of the bicycle.</i> | <u>✓ SA</u> | _____ | _____ |
| TURN SIGNALS <i>Front and rear of bicycle.</i> | <u>✓ SA</u> | _____ | _____ |
| REFLECTOS <i>Pedicabs on the pedals and pedal cars on the frame. All vehicles shall have a red reflector mounted on each side of the rear at least one inch from the outer edge and centered. All vehicles shall have a slow moving triangle displayed on the rear of the vehicle.</i> | <u>✓ SA</u> | _____ | _____ |
| TIRES/WHEELS <i>Appropriate in size and tread and matching per design of the vehicle.</i> | <u>✓ SA</u> | _____ | _____ |
| BRAKES (front & rear) <i>Braking system controlling the rear wheels shall be hydraulic or mechanical disc or drum brakes.</i> | <u>✓ SA</u> | _____ | _____ |
| MIRROR <i>Side mounted or wide-angle rear view mirror.</i> | <u>✓ SA</u> | _____ | _____ |
| OPERATIONAL HORN OR BELL | <u>✓ SA</u> | _____ | _____ |
| FRAME | <u>✓ SA</u> | _____ | _____ |
| SADDLE | <u>✓</u> | _____ | _____ |
| HANDLEBARS <i>steering</i> <i>one driver wheel</i> | <u>NA</u> | _____ | _____ |
| PEDALS | <u>✓</u> | _____ | _____ |
| CHAIN | <u>✓</u> | _____ | _____ |
| BEARINGS | <u>✓</u> | _____ | _____ |
| GEARS | <u>✓</u> | _____ | _____ |

REMARKS: _____

DISCLOSURE STATEMENT: I am a bicycle technician and have exercised reasonable diligence in inspecting this bicycle. On the basis of such inspection, I declare the apparent existing condition to be as indicated above.

Signature: Sam Andringa Printed Name: SAM Andringa

Business Gunner's Top Notch Address 307 Main St Date 10-19-2020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/19/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW...

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement...

PRODUCER: TRICOR, Inc. - Lancaster; INSURED: River Town Pedal LLC; CONTACT: Scottsdale Insurance

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT 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...

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Workers Compensation and Employers' Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The City of LaCrosse is listed as an additional insured on the general liability when required by written contract.

CERTIFICATE HOLDER CANCELLATION

CERTIFICATE HOLDER: City of LaCrosse; CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: Chantal Burke

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – GRANTOR OF LICENSES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

| |
|---|
| <p>Name Of Person(s) Or Organization(s): CITY OF LACROSSE 400 LA CROSSE ST LA CROSSE WI 54601-3374</p> |
| <p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p> |

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to their liability as grantor of a license to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

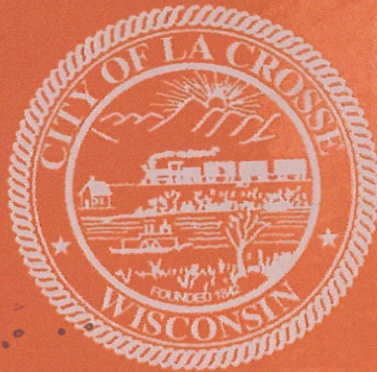
This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



Bicycle License

B 68746

CITY OF LA CROSSE



PUBLIC PASSENGER VEHICLE
LICENSE NO. 2921-088