License	Number	
License	Issued	

License Fee	50.00
Receipt #	129553

CITY OF LA CROSSE APPLICATION FOR HORSE-DRAWN VEHICLE

To the Honorable Mayor, Common Council The undersigned hereby makes a					Chief of Police of	the City of La Crosse:
BUSINESS NAME		LUNIO		572,000		
BUSINESS ADDRESS						
BUSINESS TELEPHONE						\
OWNER(S) NAME	Chuck Odel	l Johnson				
OWNER(S) DATE OF BIRTH 05/18/1960						
OWNER(S) ADDRESS	105 Peterso	n Court, Cash	iton WI 546	19		
OWNER(S) HOME TELEPHONE 608-654-5275 (60 608 606 608 606 608 608 608 608 608 6			0-5274			
 HAVE YOU EVER BEEN CON HAVE YOU BEEN CONVICT IF EITHER ANSWER IS YES, 	D OF AN ORI	INANCE VIO	LATION IN T	HE LAST FIVE	(5) YEARS? CONVICTION (us	[] YES [] NO [] YES [] NO se reverse side, if necessary)
INSURANCE CARRIER (4	tsc.	MUTUAL	/	INS		
POLICY NUMBER	SP	4747				
POLICY LIMITS	500,00	0				
ATTACHED A CERTIFICATE OF INS	SURANCE IN LL INSURED V	DICATING THE	E INSURANG ALL BE IDE	CE CARRIER, NTIFIED ON T	INSURED, POLI THE CERTIFICA	CY NUMBER, POLICY LIMITS, ATE OF INSURANCE.
METHOD OF CHARGING	!	Metered Ra	tes	Zone R	ates	Vehicle Rental RateX_
SCHEDULE OF RATES 2 50			A	NTG	4/1	
NUMBER OF VEHICLES TO BE I	ICENSED	1	-			
number of persons each veh lights and safety equipment procedures to be taken for a Vehicle #1 People Hauler with Equipped with refl	nicle is design which will b assuring that p h Benches	ed to carry e used public right-or		pacity		RECEIVED AUG 2 4 2015 CLERKS OFFICE 1
ATTACHED IS A CURRENT VETERIS FREE FROM INFECTIOUS DISEASE. I certify that each horse is fit for I further certify that the above-d comply with the provisions of the Municip I hereby certify that the information contaithis application will be basis for denial/revenue. SIGNATURE OF APPLICANT	horse-drawn ve escribed vehicle al Code pertaini ined in this app	chicle service. c(s) will be kept ng to the Horse dication is true ase.	in a clean and -Drawn Vehicl	sanitary conditi e license.	on and proper repa	air and maintenance and will further
LICENSE [] APPROVED [] SIGNATURE OF POLICE REPRES	DENIED SENTATIVE		0		DATE_	

CITY OF LA CROSSE, WI General Billing - 129553 - 2015 002100-0053 Paula G. 08/25/2015 11:14AM 60214 - JOHNSON, CHUCK

Payment Amount:

50.00

CASHTON VET CLINIC 406 SOUTH STREET CASHTON, WI 54619

OFFICE: (608)654-5284 FAX: (608)653-5303

EMAIL: cashtonvet@yahoo.com

*John Weber, DVM *Trevor O'Neil, DVM *Derek Lieffring, DVM
*Bridgette Hemmesch, DVM *Andrew Mason, DVM

To whom it may concern:

On May 5^{th} , 2015, I examined all of Chuck Johnson's horses at the farm. All of the horses appear to be healthy and free of infectious disease. The horses were all Coggins tested on the same day.

Bridgette Hemmesch, DVM

Wisconsin Mutual Select Pack Farmowner Policy

Policy: FSP 4747

Policy Term: FARMOWNERS from 04/18/2015 to 04/18/2016

Policy Inception Date: 04/18/2010

Policy Status: Active

Insured Name and AddressAgent Name and AddressCharles JohnsonLium Insurance Agency LLCLester O & Mildred Johnson100 Majestic Dr Suite 1001260 Front StreetWestby WI 54667

Cashton WI 54619 608-634-4090

Coverage is provided as shown below subject to all conditions of the policy and Company's Articles of Incorporation and By-Laws.

Insured Location(s)

Loc#	Coverage	Limit	Premium
1	80 Acres at 1260 Front Street, , Cashton, Wi, 54619 Sec: 30 Town: 15 Range: 3		

Section I - Property

1	Property Coverages With Deductible of \$ 250		632.00
	A) Dwelling Residence FO-2 Broad Form	109500	
	B) App't Private Structures	10950	
	C) Household Personal Property	54750	
	D) Additional Living Expense	21900	
	Increased Related Private Structures	2000	6.00
	F) Specific Farm Personal Property Schedule (see schedule below) \$ 250 Deductible Applies Actual Cash Value	58350	314.00
	Automatic Adjustments of Limits E) Collapse Cov End- Farm Pers Prop \$ 250 Deductible Applies		
1	E) Barn & Additions 36 X 104 W/Milkhouse & Lean \$ 250 Deductible Applies	37500	267.00
1	E) Machine Shed 34 X 60 \$ 250 Deductible Applies	3000	21.36
1	E) Pole Shed 50 X 90 \$ 250 Deductible Applies	10000	71.20
1	E) Bulk Milk Tank \$ 250 Deductible Applies	500	3.56
1	E) Pipeline Milking System \$ 250 Deductible Applies	1000	7.12
1	E) Barn Cleaner \$ 250 Deductible Applies	1000	7.12
.wiins.c	com:5080/admin/cdi-bin/farm_display.mac/DISPLAY		

E) Coll Cov- Weight of Ice/Snow-Farm Bldgs \$	50500	52.02
250 Deductible Applies		

Discounts and Surcharges

Total Property Coverage - 310450

Section II - Liability

L) Initial Farm Premises Up to 400 Acres	500000	143.00
Horse Liability (7)	500000	98.00
Option 10-Farm Employee < 40 Days/Empl		
M) Medical Payments - To The Public	1000	

Mortgage and/or Loss Payee(Name and Address)

Forms and Endorsements made part of this policy at time of issue

FO-0217 Water Exclusion Endorsement, FO-0675 Virus or Bacteria Exclusion, FO-0710 Amendatory Endorsement - Wisconsin, GL-10 Punitive Damage Exclusion, GL-890 Lead Liability Exclusion, GL0810 Migrant/Seasonal Worker Protection Act Exclusion, CL1025 1202 Terrorism Premium Notice, FO0600 1202 Certified Terrorism Loss, GL76(2.0) Farm Employee Liability, GL2 Personal Liability Coverage(Farm), FO-6 Farm Coverage, FO-20 Additional Policy Conditions/Property Coverage, FO-323 Weight of Ice, Snow or Sleet, FO-48 Ed 1.0 Increased Related Private Structures, FO-15(1.0) Actual Cash Value, FO-184 Automatic Adjustments of Limits

Total Premium 1622.38

FARM PERSONAL PROPERTY - SCHEDULED

Hay, Feed Seed, Silage	1000
Hay in Barns	5000
Other Farm Mach*max Cov \$1000/item*	3500
Tractor: JD 4000	8000
Tractor: JD 2520	6000
Tractor: JD 530	2000
Horses 7 @ 2500 Ea.	17500
Colt 1 @ 1500	1500
Horse Harness 2 Patten Leather	2000

Young Cattle-grade	5000
Haybine	1000
Green Chopper	300
Manure Spreader	600
Elevator	250
Grinder-mixer	700
Lawn & Garden Equipment JD	2000
Tools	500
Farm Supplies	500
Bale Racks & Wagons 2 @ 500	1000