License leaved			License Fee: \$		
License Issued		CITY OF LA CROSSE APPLICATION FOR PUBLIC VEHICLE FOR HIRE	Invoice #:		
License Period:	January 1st, 2026	to December 31st, 2026			
BUSINESS INFO	RMATION				
Business Name (Real/Legal)		Sinkoss USA LLC			
Trade Name (DBA)		Bullet Cab			
Address		2641 15th St S Suite 110, La Crosse WI 54601			
Zoning District New addresses must be verified compliant by a building inspector.		C-1 – Local Business			
Telephone		608-519-3200 /608-781-6655			
Wisconsin Seller Required if vehicles a		456-1028197527-02			
OWNER INFORM Owner(s) Name (First, Full Middle, Las	st)	Mian Ahmad			
(First, Full Middle, Las		Total 7 tilliag			
Owner(s) Date of Birth Home Address		0044 453 01 0 0 1			
		2641 15th St S Suite 110, La Crosse WI 54601			
HAVE YOU	EVER BEEN CONVICTED O	TED OF A FELONY OR MISDEMEANOR?	I IVES IV INO		
<ul> <li>HAVE YOU</li> </ul>	BEEN CONVICTED OF	TED OF A FELONIA OR MICHELLAND	[ ]YES[X]NO		
HAVE YOU     HAVE YOU     IF EITHER	DEEN CONVICTED OF ANSWER IS YES, INC.	TED OF A FELONY OR MISDEMEANOR? F AN ORDINANCE VIOLATION IN THE LAST FIVE (5) YEARS?	[ ]YES[X]NO		
HAVE YOU     HAVE YOU     IF EITHER /	BEEN CONVICTED OF ANSWER IS YES, INC.	TED OF A FELONY OR MISDEMEANOR? F AN ORDINANCE VIOLATION IN THE LAST FIVE (5) YEARS? LUDE NATURE OF THE OFFENSE AND PLACE OF CONVICTION	[ ]YES[X]NO		
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HAVE YOU	ORMATION  Agent WINON  Agent WINON  Agent Felephon  CATE OF INSURANCE  COLICY. ALL INSURED  Indorsed naming the C	TED OF A FELONY OR MISDEMEANOR? F AN ORDINANCE VIOLATION IN THE LAST FIVE (5) YEARS? LUDE NATURE OF THE OFFENSE AND PLACE OF CONVICTION  NA AGENCY INC / Deb  NA AGENCY INC / Deb	[ ] YES [X] NO [ ] YES [X] NO [N (use reverse side, if necessary).  AIL.PROGRESSIVE.COM  LICY NUMBER, POLICY LIMITS AN INSURANCE. page must accompany the certificat		
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HAVE YOU HAV	ORMATION  Agent WINON  Agent WINON  Agent WINON  CATE OF INSURANCE  COLICY. ALL INSURED  Indorsed naming the Colicy.  FION  Tolephology  Colicy and the vehicles of the posted the vehicles of	TED OF A FELONY OR MISDEMEANOR? F AN ORDINANCE VIOLATION IN THE LAST FIVE (5) YEARS? LUDE NATURE OF THE OFFENSE AND PLACE OF CONVICTION  NA AGENCY INC / Deb  NA AGENCY INC / Deb	[ ] YES [X] NO [ ] YES [X] NO [N (use reverse side, if necessary).  AIL.PROGRESSIVE.COM  LICY NUMBER, POLICY LIMITS AN INSURANCE. page must accompany the certificate vehicle Rental Rate		

VEHICLE ID NUMBER	YEAR, MAKE & MODEL (Model Year Cannot Exceed 10 Years of Age - Renewals are Exempt)	CAPACITY (incl. driver)	STATE & LICENSE NO
2T1BU4EE7CC838626	2012 TOYOTA COROLLA	5	WI ARY3552
4T4BF1FKXER338237	2014 TOYOTA CAMRY	5	WI-ABA-5052
5YFBU4EE40P134692	2013 TOYOTA COROLLA	5	AUD3371

*vehicles with capacities of 16 or greater	2013 TOYOTA COROLLA	5	AUD3371	
,	that have both a valid USDOT and MC	number are exempt.		
ATTACH ORIGINAL CEI for hire is in good mecha Technician.	RTIFICATE OF INSPECTION Foundation in the inspection in the inspec	OR EACH VEHIC and certificate mu	LE certifying that the vel st be completed by an A	nicle to be used S.E. Certified
ATTACH A CERTIFICAT	TE OF INSURANCE. All insured	vehicles shall be	identified on the certification	ate by Make,
Model and VIN. Said	policy must be endorsed nami ompany the Certificate of Insura	ng the City of L	a Crosse as additional	insured. Said
insured on the certificate	is not acceptable; we must rece	ive the endorsem	ent page.	эн ог адашона
VEHICLE (the title/conf	PY OF THE <b>TITLE/CONFIRMA</b> irmation must be in the name A salvage title may not be used	of business or	owner); required for	original vehicle
and inspected by an aut must be provided).	horized salvage vehicle inspect	or and rebranded	for road use (a copy of	f the inspection
ATTACH PHOTOCOPY	OF <b>LEASE OR RENTAL AGRE</b>	EMENT, if applic	able. This is required of	new applicants
or when there is a change	e in business address only.			
he above hereby makes appli Chapter 10, Article XIII of the	ication for a Public Vehicle Fo e Code of Ordinances of the Ci	r Hire License w ty of La Crosse.	vithin the City of La Cr	osse pursuan
hereby attest that the informant information or making false state tertify that the above automo inechanical condition at all tim Ch. 10, Article XIII of the La Cr	atements on this application was bile(s) was inspected by an a second will comply with the part of the	ill be basis for a A.S.E. certified	lenial/revocation of lice technician and will be	ense. I further kept in good
on. 10, Article Alli Of the La Cr	osse wunicipal Code).	$\overline{}$		
	Mukula	<b>A</b>	DATE /////	2025
GIGNATURE OF APPLICANT		\$	DATE //////	2025
IGNATURE OF APPLICANT		\$	DATE //////	2025
SIGNATURE OF APPLICANT		\$	_DATE//_///	2025
IGNATURE OF APPLICANT_ tp: city administ is owere Love you	keton me.	\$	_DATE <i>                </i>	2025
SIGNATURE OF APPLICANT_ TP: City administ is owners Love you	keton me.	<u>\$</u>	_DATE//_///	2025
SIGNATURE OF APPLICANT_  FP:  City adminis  is owere  Love your	sketon ome. ome. ours		_DATE//_//	20 25
SIGNATURE OF APPLICANT_ THE CITY administration of the city administration	tenon  me  yny  nike  4/2025		_DATE//_///	20 VS

## **CERTIFICATE OF INSPECTION**

NAME OF BUSINESS: Bullet Cab						
VEHICLE MAKE: TOYOTA MODEL: COROLLA YEAR: 2013						
VIN: 5 YFBU4EE40P134692						
•	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY			
Headlamps (incl. cover and aim)						
Parking Lamps						
Directional Lamps	*···	<del> </del>				
Flashing Warning Lamps						
Side Marker Lamps/Reflectors						
Tail Lamps (incl. cover)						
Back Up Lamps						
Brake Lamps						
Steering System						
Hood & Trunk Latches						
Emission/Exhaust System						
Tires (incl. spare & jack) (Note: tire-tread depth shall not be less tha	n 2/32 of an inch)					
Windshield (incl. wipers & washers)						
Windows (side, rear)						
Windshield Defroster						
Hoṛn						
Mirrors						
Speed Indicator						
Restraining Devices & Seats						
Brakes (incl. parking brake)						
Heater						
Air Conditioning						
Door Handles (interior & exterior)						
<b><u>DISCLOSURE STATEMENT</u></b> : I am an A.S.E. Certified Technician with an unexpired certificate and have exercised reasonable diligence in inspecting this vehicle. On the basis of such inspection, I declare the apparent existing condition to be as indicated above.						
A.S.E. Certified Technician: Signature	:: Jule Mc	Calle_ Printed Nam	e: Arden McCullson			
Business: Auto Repair	Address: <u>803                                   </u>	ruckson et La	<u>ux</u> Date: <u>1//17/55</u> —			
Business: Huto Repair Address: 803 Julian + Lun Date: 1//17/55—  Used Car Gales  Per Sec. 10-589, each public passenger vehicle shall be kept and maintained in a safe and reliable condition. To insure the safe condition of all motor vehicles, applicant must present to the City Clerk an original certificate of inspection as to the mechanical condition of the automobile from an A.S.E. certified technician (other than vehicle owner/employee).						

Rev. 11/2017