

License Number \_\_\_\_\_

License Fee \$ 200.00

License Issued \_\_\_\_\_

Receipt # 121195

**CITY OF LA CROSSE APPLICATION FOR PUBLIC VEHICLE FOR HIRE**

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 Public Vehicle for Hire License.

BUSINESS NAME	A-1 TAXI SERVICE, INC.
BUSINESS ADDRESS	3001 LAKESHORE DR LA CROSSE WI 54603 PO BOX 2982 LA CROSSE WI 54602 Zoning: <u>NA</u> - Town of Campbell <u>X</u> Confirmed by: _____
BUSINESS TELEPHONE	608-781-6655
WISCONSIN SELLER PERMIT (Req'd if vehicles are leased to drivers)	456-0000292882

OWNER(S) NAME (First, Full Middle, Last)	MARK ALAN SMITH	CARRIE ANN SMITH
OWNER(S) DATE OF BIRTH	██████████	██████████
OWNER(S) ADDRESS	1417 STATE ST LA CROSSE WI 54601	
OWNER(S) TELEPHONE	608-782-1875	

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? [ ] YES [ X ] NO  
 HAVE YOU BEEN CONVICTED OF AN ORDINANCE VIOLATION IN THE LAST FIVE (5) YEARS? [ X ] YES [ ] NO  
 IF EITHER ANSWER IS YES, INCLUDE DATE, NATURE OF THE OFFENSE AND PLACE OF CONVICTION.

Minor Traffic + ordinance violations \_\_\_\_\_  
 \_\_\_\_\_

INSURANCE CARRIER	<u>Integrity Insurance</u>
POLICY NUMBER	<u>CA2057304</u>
POLICY LIMITS min. \$1,000,000 liability \$1,000,000 umbrella	<u>\$1 mil liability / \$1 mil umbrella</u>

METHOD OF CHARGING	Metered Rates <u>X</u> Zone Rates _____ Vehicle Rental Rate _____
SCHEDULE OF RATES (or attach Schedule which will be posted in the vehicles)	<u>\$ .50 per extra \$ 2.00 per mile</u> <u>\$ 1.50 start up \$ 20.00 per hour wait</u>
NUMBER OF VEHICLES TO BE LICENSED	<u>4</u>

VEHICLE ID NUMBER	YEAR, MAKE & MODEL (Model Year Cannot Exceed 10 Years of Age - Renewals are Exempt)	CAPACITY (incl. driver)	STATE & LICENSE PLATE NO
2FMZA522O5BA85309	2005 Ford <u>Freestyle Freester</u>	7	<u>632 WPP WI</u>
1B4GP44G6WB503244	1998 Dodge Caravan	7	783-VGC WI
1GNDU23E8YD335009	2000 Chevrolet Venture	7	316-SPF WI
<u>1GNDX03E74D197713</u>	<u>2004 Chevrolet Uplander</u>	<u>7</u>	<u>850 WKX WI</u>

X ATTACH ORIGINAL CERTIFICATE OF INSPECTION FOR EACH VEHICLE CERTIFYING THAT THE VEHICLE TO BE USED FOR HIRE IS IN GOOD MECHANICAL CONDITION. *THE INSPECTION AND CERTIFICATE MUST BE COMPLETED BY AN A.S.E. CERTIFIED TECHNICIAN.*

X ATTACH A CERTIFICATE OF INSURANCE. ALL INSURED VEHICLES SHALL BE IDENTIFIED ON THE CERTIFICATE BY MAKE, MODEL AND VIN. SAID POLICY MUST NAME THE CITY OF LA CROSSE AS ADDITIONAL INSURED.

NA ATTACH A PHOTOCOPY OF THE TITLE AND REGISTRATION FOR EACH VEHICLE. NO VEHICLE WITH A SALVAGE TITLE MAY BE USED AS A PUBLIC VEHICLE. VEHICLE CANNOT BE GREATER THAN 10 MODEL YEARS AT TIME OF ORIGINAL APPLICATION (renewals are exempt).

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 automobile(s) was inspected by an A.S.E. certified technician and will be kept in good mechanical condition at all times and will comply with the provisions of law pertaining to public vehicles for hire (Ch. 10, Article XIII of the La Crosse Municipal Code).

SIGNATURE OF APPLICANT C. [Signature] DATE 11-7-14

LICENSE [ ] APPROVED [ ] DENIED

SIGNATURE OF POLICE REPRESENTATIVE \_\_\_\_\_ DATE \_\_\_\_\_

**CERTIFICATE OF INSPECTION**

NAME OF BUSINESS A-1 Taxi Service Inc  
 ADDRESS 3001 Lake Shore Dr La Crosse WI 54603  
 VEHICLE MAKE Ford MODEL freestar YEAR 2005

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY	
Headlamps (incl. cover and aim)			X	
Parking Lamps			X	
Directional Lamps			X	
Flashing Warning Lamps		11/4/14		
Sidemarkers Lamps/Reflectors			X	
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 than 2/32 of an inch)		11/4/14		
Windshield (incl. wipers & washers)				X
Windows (side, rear)				
Windshield Defroster				
Horn				
Mirrors				
Speed Indicator				
Restraining Devices & Seats				
Brakes (incl. parking brake)				
Heater				
Air Conditioning				
Door Handles (interior & exterior)				

**DISCLOSURE STATEMENT:** 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: [Signature] Printed Name: Robin Helgeson

Business Robin's Auto Repair Address 1510 1st St Date 11/4/14

*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 a certificate of inspection as to the mechanical condition of the automobile from an A.S.E. certified technician (other than vehicle owner/employee).*

**CERTIFICATE OF INSPECTION**

NAME OF BUSINESS A-1 Taxi Service Inc

ADDRESS 3001 Lake Shore Drive Chicago

VEHICLE MAKE Dodge MODEL Caravan YEAR 1998

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY	
Headlamps (incl. cover and aim)	_____	_____	<u>X</u>	
Parking Lamps	_____	_____		
Directional Lamps	_____	_____		
Flashing Warning Lamps	_____	_____		
Sidemarkers Lamps/Reflectors	_____	_____		
Tail Lamps (incl. cover)	_____	_____		
Back Up Lamps	_____	_____		
Brake Lamps	_____	_____		
Steering System	_____	_____		
Hood & Trunk Latches	_____	<u>11-3-14</u>		
Emission/Exhaust System	_____	_____		<u>X</u>
Tires (incl. spare & jack) (Note: tire-tread depth shall not be less than 2/32 of an inch)	_____	_____		
Windshield (incl. wipers & washers)	_____	_____		
Windows (side, rear)	_____	_____		
Windshield Defroster	_____	_____		
Horn	_____	_____		
Mirrors	_____	_____		
Speed Indicator	_____	_____		
Restraining Devices & Seats	_____	_____		
Brakes (incl. parking brake)	_____	_____		
Heater	_____	_____		
Air Conditioning	_____	_____		
Door Handles (interior & exterior)	_____	_____	_____	

**DISCLOSURE STATEMENT:** 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: [Signature] Printed Name: Robin Helgeson

Business Robins Repair Address N5610 Crty Rd OT Date 11-3-14

*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 a certificate of inspection as to the mechanical condition of the automobile from an A.S.E. certified technician (other than vehicle owner/employee).*

**CERTIFICATE OF INSPECTION**

NAME OF BUSINESS A-1 TUN SERVICE INC  
 ADDRESS 3001 Lake Shore Drive La Crosse WI 54603  
 VEHICLE MAKE Chevrolet MODEL Venture YEAR 2001

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	<u>X</u>
Parking Lamps	_____	_____	
Directional Lamps	_____	_____	
Flashing Warning Lamps	_____	_____	
Sidemarkers 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 than 2/32 of an inch)	_____	<u>10-31-14</u>	
Windshield (incl. wipers & washers)	_____	_____	<u>X</u>
Windows (side, rear)	_____	_____	
Windshield Defroster	_____	_____	
Horn	_____	_____	
Mirrors	_____	_____	
Speed Indicator	_____	_____	
Restraining Devices & Seats	_____	_____	
Brakes (incl. parking brake)	_____	_____	
Heater	_____	_____	
Air Conditioning	_____	_____	
Door Handles (interior & exterior)	_____	_____	

**DISCLOSURE STATEMENT:** 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: [Signature] Printed Name: Robert Helgeson  
 Business Robins Repair Address N5610 Cnty Ct Date 10/31/14

*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 a certificate of inspection as to the mechanical condition of the automobile from an A.S.E. certified technician (other than vehicle owner/employee).*

**CERTIFICATE OF INSPECTION**

NAME OF BUSINESS A-1 Taxi Service Inc

ADDRESS 3001 Lake Shore Drive La Crosse WI 54603

VEHICLE MAKE Chevrolet MODEL Venture YEAR 2004

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	<u>X</u>
Parking Lamps	_____	_____	
Directional Lamps	_____	_____	
Flashing Warning Lamps	_____	_____	
Sidemarkers 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 than 2/32 of an inch)	_____	_____	
Windshield (incl. wipers & washers)	_____	_____	
Windows (side, rear)	_____	_____	
Windshield Defroster	_____	_____	
Horn	_____	_____	
Mirrors	_____	_____	
Speed Indicator	_____	_____	
Restraining Devices & Seats	_____	_____	
Brakes (incl. parking brake)	_____	_____	
Heater	_____	_____	
Air Conditioning	_____	_____	
Door Handles (interior & exterior)	_____	_____	<u>X</u>

**DISCLOSURE STATEMENT:** 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: Bob Helgeson Printed Name: Bob Helgeson

Business Robins Repair Address N 5610 City OT Date 10-31-14

*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 a certificate of inspection as to the mechanical condition of the automobile from an A.S.E. certified technician (other than vehicle owner/employee).*