

Renewal

License Number _____

License Fee: \$ 340.00

License Issued _____

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

Invoice #: 405-4377 ✓

License Period: January 1st, 2019 to December 31st, 2019

BUSINESS INFORMATION

Business Name (Real/Legal)	DJL, Inc.
Trade Name (DBA)	Luxury Limousines
Address	1524 Flat Rd., Suite 110, Holmen, WI 54636
Zoning District <i>New addresses must be verified compliant by a building inspector.</i>	N/A - Holmen
Telephone	608-317-5589
Wisconsin Seller Permit No. <i>Required if vehicles are leased to drivers.</i>	Drivers paid hourly, do not have lease vehicles.

OWNER INFORMATION

Owner(s) Name <i>(First, Full Middle, Last)</i>	Don John Lee
Owner(s) Date of Birth	[REDACTED]
Home Address	4045 N. Lauderdale Pl., Onalaska, WI 54650 <u>212 Harvest Ct Warrens, WI 54606</u>
Telephone	Home 608-304-1117 Cell 608-317-5589

- 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? [] YES [X] NO
- IF EITHER ANSWER IS YES, INCLUDE NATURE OF THE OFFENSE AND PLACE OF CONVICTION (use reverse side, if necessary).

INSURANCE INFORMATION

Insurance Carrier/Agent	Noble Insurance Service LLC
Address	W5822 County Road OS, Onalaska, WI 54650
Telephone/Email	Telephone 608-779-5500 Email sherryn@nobleinsurance.net

ATTACH A CERTIFICATE OF INSURANCE INDICATING THE INSURANCE CARRIER, INSURED, POLICY NUMBER, POLICY LIMITS AND DURATION OF THE POLICY. ALL INSURED VEHICLES SHALL BE IDENTIFIED ON THE CERTIFICATE OF INSURANCE. The policy must be endorsed naming the City of La Crosse as Additional Insured and said endorsement page must accompany the certificate.

RATE INFORMATION

Method of Charging	Metered Rates ____ Zone Rates ____ Vehicle Rental Rate <u>X</u>
Schedule of Rates <i>(or attach Schedule to be posted the vehicles)</i>	See Attached Page For Rate Fees

VEHICLE INFORMATION

Number of Vehicles to be Licensed	<u>14</u> 9
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VEHICLE ID NUMBER	YEAR, MAKE & MODEL <i>(Model Year Cannot Exceed 10 Years of Age - Renewals are Exempt)</i>	CAPACITY <i>(incl. driver)</i>	STATE & LICENSE NO
See Attached Page			

*vehicles with capacities of 16 or greater that have both a valid USDOT and MC number are exempt.

Y 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.

Y ATTACH A CERTIFICATE OF INSURANCE. All insured vehicles shall be identified on the certificate by Make, Model and VIN. Said policy must be endorsed naming the City of La Crosse as additional insured. Said endorsement MUST accompany the Certificate of Insurance at the time of filing. Note: A statement of additional insured on the certificate is not acceptable; we must receive the endorsement page.

_____ ATTACH A PHOTOCOPY OF THE TITLE/CONFIRMATION OF OWNERSHIP & REGISTRATION FOR EACH VEHICLE (the title/confirmation must be in the name of business or owner); required for original vehicle application only. Note: A salvage title may not be used as a public vehicle until the vehicle has been repaired and inspected by an authorized salvage vehicle inspector and rebranded for road use (a copy of the inspection must be provided).

_____ ATTACH PHOTOCOPY OF LEASE OR RENTAL AGREEMENT, if applicable. This is required of new applicants or when there is a change in business address only.

The above hereby makes application for a Public Vehicle For Hire License within the City of La Crosse pursuant to Chapter 10, Article XIII of the Code of Ordinances of the City of La Crosse.

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 Donald J. Free DATE 11-5-18

LICENSE [] APPROVED [] DENIED
SIGNATURE OF POLICE REPRESENTATIVE _____ DATE _____



1524 Flat Road, Suite 110, Holmen, WI 54636
608.317.5589 | info@luxurylimosinc.com

Rate Sheet

Coach Bus (44 passengers)

\$400 for the 1st hour, \$200 for the 2nd hour, \$60 each additional hour

Coach Bus (36 passengers)

\$350 for the 1st hour, \$150 for the 2nd hour, \$60 each additional hour

Limo Bus (28 passengers)

\$350 for the 1st hour, \$200 for the 2nd hour, \$60 each additional hour

Limo Bus (24 passengers)

\$300 for the 1st hour, \$200 for the 2nd hour, \$60 each additional hour

Limo Bus (14 passengers)

\$250 for the 1st hour, \$100 for the 2nd hour, \$60 each additional hour

Stretch Limousine Car (9 passengers)

\$150 for the 1st hour, \$50 each additional hour

Limousine Van (9 passengers)

\$100 for the 1st hour, \$50 each additional hour

Lincoln Navigator (6 or 7 passengers)

\$100 for the 1st hour, \$50 each additional hour

Limousine Car (6 passengers)

\$100 for the 1st hour, \$50 each additional hour

Lincoln MKX (4 passengers)

\$75 for the 1st hour, \$50 each additional hour

DJL, Inc. Vehicle Listing 2019:

<u>Year, Make, Model</u>	<u>VIN</u>	<u>License Plate</u>	<u>Capacity</u>
2002 Lincoln Towncar	1L1FM81W32Y603185	148-RWH WI	8
2002 Ford Limo Bus	1FDXE45S42HA00861	LUXLIMO WI	15
2003 Lincoln Limousine	1L1FM81W23Y658003	466-TNW WI	10
2003 Lincoln Towncar	1L1FM81W23Y600165	LUXLIM3 WI	11
2003 Ford Limo Van	1FTNS24L73HB54632	535-TGG WI	11
2014 Lincoln Navigator	5LMJJ3J51EEL00291	299-UDJ WI	7
2013 Lincoln MKX	2LMDJ8JK6DBL12938	983-UEP WI	4
2007 Cadillac Sedan	1G6KD57Y87U201950	511-YBH WI	5
2015 Toyota Van	FTDYK3DC4FS561035	468-YUG WI	5
2016 Lincoln Sport Utility	5LMJJ3LT1GEL01259	811-TVY WI	6
2017 Lincoln MKX	2LMPJ8LR9HBL44599	AAC-9168 WI	4

Remove
3 crossed
out

See newest list
Attached

Vehicle List - DJL Inc DBA Luxury Limos Inc

Year	Make	Model	VIN	Capacity	License #
2002	Lincoln	Towncar Stretch Limo	1L1FM81W32Y603185	8	148RWH
2002	Ford	Limo Bus	1FDXE45S42HA00861	15	LUXLIMO
2003	Lincoln	Towncar Stretch Limo #2	1L1FM81W23Y658003	10	466TNW
2003	Lincoln	Towncar Stretch Limo #3	1L1FM81W23Y600165	11	LUXLIM3
2003	Ford	Limo Van	1FTNS24L73HB54632	11	535TGG
2013	Lincoln	MKX	2LMDJ8JK6DBL12938	5	983UEP
2014	Lincoln	Navigator L	5LMJJ3J51EEL00291	8	299UDJ
2015	Lincoln	Navigator L	5LMJJ3LT1GEL01259	7	811TVY
2017	Ford	Starcraft Limo Bus	1FDES8PM9HKB36386	15	ACD8590

* Adding
for 2018
&
2019

CERTIFICATE OF INSPECTION


NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln MODEL Towncar YEAR 2002

VIN 1L1FM81W32Y603185

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	/
Parking Lamps	_____	_____	/
Directional Lamps	_____	_____	/
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) <i>(Note: tire-tread depth shall not be less than 2/32 of an inch)</i>	_____	_____	/
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:  Printed Name: Paul L. Anderson

Business: Andy Main St Ann Address: Main St Helen Mo Date: 11-8-02

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).

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Ford MODEL Limo Bus YEAR 2002

VIN 1FDXE45S42HA00861

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

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:  Printed Name: Paul Anderson

Business: Mundy Man St Avon Address: main st Holden Wm Date: 11-8-18

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).

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln MODEL Limousine YEAR 2003

VIN 1L1FM81W23Y658003

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	/
Parking Lamps	_____	_____	/
Directional Lamps	_____	_____	/
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) <i>(Note: tire-tread depth shall not be less than 2/32 of an inch)</i>	_____	_____	/
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: Paul J. Arnold Printed Name: Paul Arnold

Business: Andy Main St Auto Address: Main St Helena Wyo Date: 11-5-18

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).

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln MODEL Towncar YEAR 2003

VIN 1L1FM81W23Y600165

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

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: *Paul F. Anderson* Printed Name: Paul Anderson

Business: Andy Ma St Auto Address: main st Helen Wis Date: 11-8-18

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).

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJI, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Ford MODEL Limo Van YEAR 2003

VIN 1FTNS24L73HB54632

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	✓
Parking Lamps	_____	_____	✓
Directional Lamps	_____	_____	✓
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) <i>(Note: tire-tread depth shall not be less than 2/32 of an inch)</i>	_____	_____	✓
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: Paul P. Anderson Printed Name: Paul Anderson

Business: Andy Main St Auto Address: 12000 St Albans Way Date: 11-8-18

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).

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln MODEL MKX YEAR 2013

VIN 2LMDJ8JK6DBL12938

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

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: *Paul J. Anderson* Printed Name: PAUL ANDERSON

Business: *Max St Auto* Address: *max St Auto Home Way* Date: *11-8-18*

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).

CERTIFICATE OF INSPECTION


NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln MODEL Navigator YEAR 2014

VIN 5LMJJ3J51EEL00291

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

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:  Printed Name: Paul Anderson

Business: Andy Main St Auto Address: Main St Highm Wv Date: 11-8-18

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).

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln MODEL Sport Utility YEAR 2016

VIN 5LMJJ3LTI GEL01259

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	/
Parking Lamps	_____	_____	/
Directional Lamps	_____	_____	/
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) <i>(Note: tire-tread depth shall not be less than 2/32 of an inch)</i>	_____	_____	/
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: Paul J. Anderson Printed Name: Paul Anderson

Business: Andy Main St Auto Address: Main St Holme Wn Date: 11-8-18

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).

New for 2018

CERTIFICATE OF INSPECTION

NAME OF BUSINESS DJL, Inc. d/b/a Luxury Limousines

VEHICLE MAKE Lincoln Ford Starcraft MODEL MKX Limo Bus YEAR 2017

VIN 2LMPJ8LR9HBL44599 1FTD ES8PM 9HKB 36386

	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)	_____	_____	_____ / _____
Parking Lamps	_____	_____	_____ / _____
Directional Lamps	_____	_____	_____ / _____
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 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: Paul J. Anderson Printed Name: Paul Anderson

Business: Andy Motor St Auto Address: Main St Auto Hbrn Wn Date: 11-8-18

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).



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/9/2018

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. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER NOBLE INSURANCE SERVICE LLC W5822 County Road OS Onalaska, WI 54650 100194133		CONTACT NAME: PHONE (A/C, No, Ext): (608)779-5500 E-MAIL ADDRESS: sherryn@nobleinsurance.net FAX (A/C, No): (608)779-5503	
INSURED LUXURY LIMO'S DBA: LUXURY LIMO'S (DJL, Inc.) 103 10TH AVE S ONALASKA, WI 54650		INSURER(S) AFFORDING COVERAGE INSURER A: RPS-Rlsh Placement Services INSURER B: NORTHLAND INSURANCE GROUP INSURER C: INSURER D: INSURER E: INSURER F:	

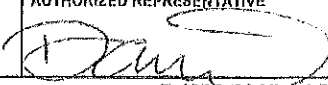
COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUDR (NSD) (WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY		WP006818	5/17/2018	5/17/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,500,000.00 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		HXS100045502	5/17/2018	5/17/2019	EACH OCCURRENCE \$ 3,500,000.00 AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER IS ADDITIONAL INSURED AS RESPECTS TO THE OPERATIONS OF THE NAMED INSURED. RE: ATTACHED SCHEDULE OF AUTOS.

CERTIFICATE HOLDER CITY OF LA CROSSE 400 LA CROSSE ST LA CROSSE, WI 54601	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 
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AGENCY CUSTOMER ID: _____

VEHICLE SCHEDULE

DATE (MM/DD/YYYY)

11/9/2018

AGENCY NOBLE INSURANCE SERVICE LLC		CARRIER SCU		RAIC CODE
POLICY NUMBER WP006618		EFFECTIVE DATE 5/17/2018	NAMED INSURED(S) LUXURY LIMO'S	

VEHICLE DESCRIPTION

VEH # 1	YEAR 2002	MAKE: Lincoln	BODY TYPE: 8 Passenger	VEHICLE TYPE			SYM / AGE	COMP / OTC SYM	COLL SYM			
MODEL: Towncar Stretch Limo		V.I.N.: 1L1FM81W32Y603185		PP	SPEC	COML						
GARAGING ADDRESS	STREET (Required In KY)		CITY	COUNTY			STATE	ZIP				
LIC STATE WI	TERR	GW / GCW	CLASS	SIC	FACTOR	SEAT CP 8	RADIUS	FARTHEST TERMINAL	COST NEW \$			
USE	COMML	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F FT	LSP COMP/OTC COLL	RENT REIMB FG	DEDUCTIBLES	ACV	COMP/OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR					AA	ST AMT	\$	
FARM	SERVICE								\$	\$		COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DRIVER				TOTAL PREM: \$					

VEH # 2	YEAR 2002	MAKE: Ford	BODY TYPE: 16 Passenger	VEHICLE TYPE			SYM / AGE	COMP / OTC SYM	COLL SYM			
MODEL: Limo Bus		V.I.N.: 1FDXE45S42HA00861		PP	SPEC	COML						
GARAGING ADDRESS	STREET (Required In KY)		CITY	COUNTY			STATE	ZIP				
LIC STATE WI	TERR	GW / GCW	CLASS	SIC	FACTOR	SEAT CP 15	RADIUS	FARTHEST TERMINAL	COST NEW \$			
USE	COMML	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F FT	LSP COMP/OTC COLL	RENT REIMB FG	DEDUCTIBLES	ACV	COMP/OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR					AA	ST AMT	\$	
FARM	SERVICE								\$	\$		COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DRIVER				TOTAL PREM: \$					

VEH # 3	YEAR 2003	MAKE: Lincoln	BODY TYPE: 10 Passenger	VEHICLE TYPE			SYM / AGE	COMP / OTC SYM	COLL SYM			
MODEL: Towncar Stretch Limo		V.I.N.: 1L1FM81W23Y658003		PP	SPEC	COML						
GARAGING ADDRESS	STREET (Required In KY)		CITY	COUNTY			STATE	ZIP				
LIC STATE WI	TERR	GW / GCW	CLASS	SIC	FACTOR	SEAT CP 10	RADIUS	FARTHEST TERMINAL	COST NEW \$			
USE	COMML	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F FT	LSP COMP/OTC COLL	RENT REIMB FG	DEDUCTIBLES	ACV	COMP/OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR					AA	ST AMT	\$	
FARM	SERVICE								\$	\$		COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DRIVER				TOTAL PREM: \$					

VEH # 4	YEAR 2003	MAKE: Lincoln	BODY TYPE: 11 Passenger	VEHICLE TYPE			SYM / AGE	COMP / OTC SYM	COLL SYM			
MODEL: Towncar Stretch Limo		V.I.N.: 1L1FM81W23Y600165		PP	SPEC	COML						
GARAGING ADDRESS	STREET (Required In KY)		CITY	COUNTY			STATE	ZIP				
LIC STATE WI	TERR	GW / GCW	CLASS	SIC	FACTOR	SEAT CP 11	RADIUS	FARTHEST TERMINAL	COST NEW \$			
USE	COMML	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F FT	LSP COMP/OTC COLL	RENT REIMB FG	DEDUCTIBLES	ACV	COMP/OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR					AA	ST AMT	\$	
FARM	SERVICE								\$	\$		COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DRIVER				TOTAL PREM: \$					

VEH # 5	YEAR 2003	MAKE: Ford	BODY TYPE: 11 Passenger	VEHICLE TYPE			SYM / AGE	COMP / OTC SYM	COLL SYM			
MODEL: Limo van		V.I.N.: 1FTNS24L73HB54632		PP	SPEC	COML						
GARAGING ADDRESS	STREET (Required In KY)		CITY	COUNTY			STATE	ZIP				
LIC STATE WI	TERR	GW / GCW	CLASS	SIC	FACTOR	SEAT CP 11	RADIUS	FARTHEST TERMINAL	COST NEW \$			
USE	COMML	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F FT	LSP COMP/OTC COLL	RENT REIMB FG	DEDUCTIBLES	ACV	COMP/OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR					AA	ST AMT	\$	
FARM	SERVICE								\$	\$		COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DRIVER				TOTAL PREM: \$					



VEHICLE SCHEDULE

DATE (MM/DD/YYYY)
11/9/2018

AGENCY NOBLE INSURANCE SERVICE LLC		CARRIER SCU		NAIC CODE
POLICY NUMBER WP006818		EFFECTIVE DATE 5/17/2018	NAMED INSURED(S) LUXURY LIMO'S	

VEHICLE DESCRIPTION

VEH # 6	YEAR 2013	MAKE: Lincoln	MODEL: MKX	BODY TYPE: 5 Passenger	V.I.N.: 2LMDJ8JK6DBL12938	VEHICLE TYPE	SYM / AGE	COMP / OTC SYM	COLL SYM			
GARAGING ADDRESS		STREET (Required In KY)		CITY	COUNTY	STATE	ZIP					
LIC STATE WI	TERR	GWV / GCW	CLASS	SIC	FACTOR	SEAT CP 5	RADIUS	FARTHEST TERMINAL	COST NEW			
USE	COMM L	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F	LSP	RENT REIMB FG	DEDUCTIBLES	ACV	COMP / OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR		FT	COMP / OTC		AA	ST AMT		
FARM	SERVICE					FTW	COLL					COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DR/CR:	TOTAL PREM: \$								

VEH # 7	YEAR 2014	MAKE: Lincoln	MODEL: Navigator L	BODY TYPE: 8 Passenger	V.I.N.: 5LMJJ3J51EEL00291	VEHICLE TYPE	SYM / AGE	COMP / OTC SYM	COLL SYM			
GARAGING ADDRESS		STREET (Required In KY)		CITY	COUNTY	STATE	ZIP					
LIC STATE WI	TERR	GWV / GCW	CLASS	SIC	FACTOR	SEAT CP 8	RADIUS	FARTHEST TERMINAL	COST NEW			
USE	COMM L	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F	LSP	RENT REIMB FG	DEDUCTIBLES	ACV	COMP / OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR		FT	COMP / OTC		AA	ST AMT		
FARM	SERVICE					FTW	COLL					COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DR/CR:	TOTAL PREM: \$								

VEH # 8	YEAR 2015	MAKE: Lincoln	MODEL: Navigator	BODY TYPE: 7 Passenger	V.I.N.: 5LMJJ3LT1GEL01259	VEHICLE TYPE	SYM / AGE	COMP / OTC SYM	COLL SYM			
GARAGING ADDRESS		STREET (Required In KY)		CITY	COUNTY	STATE	ZIP					
LIC STATE WI	TERR	GWV / GCW	CLASS	SIC	FACTOR	SEAT CP 7	RADIUS	FARTHEST TERMINAL	COST NEW			
USE	COMM L	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F	LSP	RENT REIMB FG	DEDUCTIBLES	ACV	COMP / OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR		FT	COMP / OTC		AA	ST AMT		
FARM	SERVICE					FTW	COLL					COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DR/CR:	TOTAL PREM: \$								

VEH # 9	YEAR 2017	MAKE: Starcraft	MODEL: Limo Bus	BODY TYPE: 15 Passenger	V.I.N.: 1FDES8PM9HKB36386	VEHICLE TYPE	SYM / AGE	COMP / OTC SYM	COLL SYM			
GARAGING ADDRESS		STREET (Required In KY)		CITY	COUNTY	STATE	ZIP					
LIC STATE WI	TERR	GWV / GCW	CLASS	SIC	FACTOR	SEAT CP 15	RADIUS	FARTHEST TERMINAL	COST NEW			
USE	COMM L	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F	LSP	RENT REIMB FG	DEDUCTIBLES	ACV	COMP / OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR		FT	COMP / OTC		AA	ST AMT		
FARM	SERVICE					FTW	COLL					COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DR/CR:	TOTAL PREM: \$								

VEH #	YEAR	MAKE:	MODEL:	BODY TYPE:	V.I.N.:	VEHICLE TYPE	SYM / AGE	COMP / OTC SYM	COLL SYM			
GARAGING ADDRESS		STREET (Required In KY)		CITY	COUNTY	STATE	ZIP					
LIC STATE	TERR	GWV / GCW	CLASS	SIC	FACTOR	SEAT CP	RADIUS	FARTHEST TERMINAL	COST NEW			
USE	COMM L	FOR HIRE	CHECK COVERAGES	ADD'L NO-FAULT	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	F	LSP	RENT REIMB FG	DEDUCTIBLES	ACV	COMP / OTC	SPEC C OF L
PLEASURE	RETAIL		LIAB NO-FAULT	MED PAY UNINS MOTOR		FT	COMP / OTC		AA	ST AMT		
FARM	SERVICE					FTW	COLL					COLL
DRIVE TO WORK / SCHOOL	< 15 MILES	15 MILES +	NET VEH DR/CR:	TOTAL PREM: \$								