Liceuse Number	
1. ense Issued	

License Fee \$	200	<u>.00</u>
Receipt #		

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.

The undersigned hereby	makes application for a Public Vehicle for Hire License.
BUSINESS NAME d	A BULLET CAB SINKOSS USA LLC
BUSINESS ADDRESS	2709 SOUTH AVE, LACROSSE WI 54601
:	Zoning: Commercial Confirmed by: Steve Nederloe 1/4/13
BUSINESS TELEPHONE	608-519-3200
WISCONSIN SELLER PERMIT (Req'd if vehicles are leased to drivers	
OWNER(S) NAME (First, Full Middle, Last)	MIAN MUKHTAR AHMAD (MIKE)
OWNER(S) DATE OF BIRTH	### ##################################
OWNER(S) ADDRESS	2611 15 TH ST S LA CROSSE WI 54601
OWNER(S) TELEPHONE	608-797-2511
HAVE YOU BEEN CONVICTED (TED OF A FELONY OR MISDEMEANOR? [] YES [] NO DF AN ORDINANCE VIOLATION IN THE LAST FIVE (5) YEARS? [] YES [] NO LUDE DATE, NATURE OF THE OFFENSE AND PLACE OF CONVICTION.
INSURANCE CARRIER	NATIONAL INDEMNITY COMPANY
POLICY NUMBER	CPS 1614380-01
POLICY LIMITS min. \$1,000,000 liability \$1,000,000 umbrelia	\$ 2 mil CSL auto liability
METHOD OF CHARGING	Metered Rates _X Zone Rates Vehicle Rental Rate
SCHEDULE OF RATES (or attach Schedule which will be posted in	n the vehicles) Pesson, \$ 20.00 hommail- (COPY Attachen).
NUMBER OF VEHICLES TO B	E LICENSED 4
VEHICLE ID NUMBER	YEAR, MAKE & MODEL CAPACITY (Model Year Cannot Exceed STATE & LICENSE PLATE NO

VEHICLE ID NUMBER	YEAR, MAKE & MODEL (Model Year Cannot Exceed 10 Years of Age - Renewals are Exempt)	CAPACITY (incl. driver)	STATE & LICENSE PLATE NO
5GZDV23L35D192520	2005, SATURN, RELY 2	7	WI BULL3T 1
2HKRL1865YH606454	2000 HONDA, ODESSY	7	WI BULL3T 2
5620123450207970	2005, SATURN, RELYZ	フ	WI BULL3T 3
1C3EL46TO4N141279	2004, CHRYSLER SEBRING	5	WI 692 VGC

	. !	
VEHICLE TO BE USED FOR HIR	TE OF INSPECTION FOR EACH VEHICLE CERTIFING THAT THE E IS IN GOOD MECHANICAL CONDITION. THE INSPECTION ASTED BY AN A.S.E. CERTIFIED TECHNICIAN.	
	NSURANCE. ALL INSURED VEHICLES SHALL BE IDENTIFIED (MODEL AND VIN. SAID POLICY MUST NAME THE CITY SURED.	
WITH A SALVAGE TITLE MAY B	TITLE AND REGISTRATION FOR EACH VEHICLE. NO VEHICLE USED AS A PUBLIC VEHICLE. VEHICLE CANNOT BE GREAT E OF ORIGINAL APPLICATION (renewals are exempt).	
information or making false statements on thi that the above automobile(s) was inspected	ed in this application is true and correct. I am aware that withhold is application will be basis for denial/revocation of license. I further cert by an A.S.E. certified technician and will be kept in good mechanine provisions of law pertaining to public vehicles for hire (Sec. 20.16 of	tify ical
LICENSE [] APPROVED [] DENIED		
SIGNATURE OF POLICE REPRESENTATIVE	DATE	

AU95495	
AC	ORD
<u> </u>	

CERTIFICATE OF LIABILITY INSURANCE

DATE (MANDOMYYY)

08/15/2013 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(les) must 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). CONTACT NAME: PHONE (AC. No. Ext): E-MAIL ACORESS: PRODUCER FRANK R COLLAS WISOTA INS & FINANCIAL 608-784-3272 FAX (A/C, No): 608-784-3278 SRVCS LA CROSSE WI frank.collas@murphylnsurance.com C/O:SCOBIE GROUP-MIDWEST INSURER(S) AFFORDING COVERAGE NAIC # GENERAL INSURER A: NATIONAL INDEMNITY COMPANY 20060 MSHBED INSURER B: SCOTTSDALE INS COMPANY SINKOSS USA LLC DBA BULLET 41297 CAB INSURER C: 2641 15TH ST SO INSURER D: LA CROSSE WI 54601 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. ADOL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER GENERAL LIABILITY CPS1614380@1 08/14/2013 08/14/2014 EACH OCCURRENCE \$1,000,000 R COMMERCIAL GENERAL LIABILITY DAMAGE TO RENTED PREMISES (Eg occurrent \$100,000 CLAIMS-MADE X OCCUR s5,000 MED EXP (Any one person) PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: \$ INCLUDED PRODUCTS - COMPACE AGG POLICY PRO AUTOMOBILE LIABILITY 08/28/2013 08/28/2014 COMBINED SINGLE LIMIT 70APS042397 2,000,000 ANY AUTO SODILY INJURY (Per person) ALL OWNED SCHEDULED AUTOS NON-OWNED Α **BODILY INJURY (Per accid** HIRED AUTOS PERTY DAMAGE PROPERTY D AUTOS \$ UMBRELLA LIAB OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE . EA EMPLOYEE S E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 10: Additional Remarks Schodule, # more space is required)
2005 Saturn Relay vin # 5GZDV23L15D207970
2005 SATURN RELAY #192520
2000 HONDA ODYSSEY #606454
2004 CHRYSLER SEBRING #141279
certificate holder is listed as designated insured per form CA2048. **CERTIFICATE HOLDER** 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 City of La Crosse

400 La Crosse St La Crosse, WI 54601

OFIL

2

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED INSURED

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM MOTOR CARRIER COVERAGE FORM TRUCKERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" under the Who Is An Insured Provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective: 11/18/13 Countersigned By:

Named Insured: SINKOSS USA LLC DBA
BULLET CAB (Authorized Representative)

SCHEDULE

Name of Person(s) or Organization(s):	CITY OF LA CROSSE	
	400 LA CROSSE STREET	
	LA CROSSE WI 54601	

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to the endorsement.)

Each person or organization shown in the Schedule is an "insured" for Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who is An Insured Provision contained in Section II of the Coverage Form.

BULLET CAB

2641 15th Street South La Crosse Wi 54601 608-519-3200 /608-797-251

Bulletcab@hotmail.com

Subject: Rates And Fees

\$ 1.50 Start up

\$ 2.00 Mile

\$ 20.0 Hour wait

\$.50 per extra person

Contact Info: Mian Ahmad(Mike)

608-797-2511

Mikeahmad786@hotmail.com

5GZDV23L35D192520 2005 SATURN Issue Date ACTUAL 01/09/2013 TRUK 01/09/2013 13009L6017-0 SILVER/ALUMINUM 57878130095 VAN Titled Owner(s) SINKOSS USA LLC 2641 15TH ST S LA CROSSE, WI 54601-6413 The person, firm or corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (liens) shown. The order in which the Lien Holders appear on this Title does not necessarily represent their priority. The Wisconsin Department of Transportation will not be responsible for fails or fraudulent codemeter statements made in the assignment of the Certificate of Title or for errors in reporting mileage, brand disclosures or the history of the vehicle. The department has no actual knowledge about the history of the vehicle and makes no warranty that the title brands or mileage disclosures on prior titles have been carried forward onto 5GZDV23L35D192520 Lien Holder(s) NONE. Additional Vehicle Detail SELLER: When the vehicle is sold, complete the ASSIGNMENT OF CERTIFICATE OF TITLE on the top back of this title and deliver the title to the purchaser with the vehicle. You may wish to retain a copy of this title with the purchaser's information and signature as proof of sale for your records.

PURCHASER: Apply for a new title with the Wisconsin Division of Motor Vehicles immediately. To legally operate this vehicle, you are required to register it with the Division of Motor Vehicles.

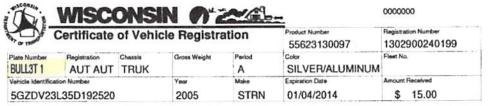
MAIL ADDRESS: Wisconsin Department of Transportation PO Box 7949, Madieon, WI 53707-7949

11-1 10556 42004 931

S CTO CTO CTO CTO CTO CTO CTO CTO CTO

QUESTIONS: Contact the Division of Motor Vehicles at: 414-266-1000, 608-266-1466 www.dot.wisconsin.gov

BULLET 1.



SINKOSS USA LLC 2641 15TH ST S LA CROSSE, WI 54601-6413 This Registration Certificate is not a Title. Not Valid for Transfer of Ownership.

Contact the 414-265-1000 Division of Motor 608-265-1456 Vehicles at: www.dot.wisconsin.gov



Bullet Cab 2641 15th Street S. La Crosse Wi 54601

NAME OF BUSINESS	BULLET C	AB'	
ADDRESS 2709 SOUTH	AVE, SUITE	E H' LA CROS	
VEHICLE MAKE SATURY	MODEL	RELY 2	YEAR 2005
	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)			✓
Parking Lamps			
Directional Lamps			
Flashing Warning Lamps			
Sidemarker Lamps/Reflectors			<u> </u>
Tail Lamps (incl. cover)			
Back Up Lamps			V
Brake Lamps			
Steering System			
Hood & Trunk Latches			
Emission/Exhaust System			<u></u>
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			~
Horn		·	
Mirrors			
Speed Indicator			V
Restraining Devices & Seats			
Brakes (incl. parking brake)			
Heater			
Air Conditioning			
Door Handles (interior & exterior)			<u></u>
<u>DISCLOSURE STATEMENT</u> : I am reasonable diligence in inspecting this be as indicated above.	vehicle. On the basis o	of such inspection, I declare	
A.S.E. Certified Technician Signature	: Matthe M	Printed	Name: Mat Kem
Business Matio Ato Rapas		_	Date 11-4-13





2HKRL1865YH606454

2000 HONDA

13227L0009-1

08/15/2013

TRUK

ACTUAL

06/29/2005

15693132275

VAN

GRAY

Titled Owner(s) SINKOSS USA LLC

2641 15TH ST S

LA CROSSE, WI 54601-6413

The person, firm of corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (liens) shown. The order in which the Lien Holder's appear on this Title does not necessarily represent their priority. The Wisconsin Department of Transportation will not be responsible for talse or trausfulent odometer statements made in the assignment of the Certificate of Title of for errors in reporting mileage, brand disclosures or the history of the vehicle. The department has no actual knowledge about the history of the vehicle and makes no warranty that the title brands or mileage disclosures on prior titles have been carried toward onto 2HKRL1865YH606454

Lien Holder(s)

NONE.

Additional Vehicle Detail PREVIOUSLY TITLED IN: NO

EXEMPT FROM ODOMETER - 10 YEARS OLD

SELLER: When the vehicle is sold, complete the ASSIGNMENT OF CERTIFICATE OF TITLE on the top back of this title and deliver the title to the purchaser with the vehicle. You may wish to retain a copy of this title with the purchaser's information and signature as proof of sale for your records.

PURCHASER: Apply for a new title with the Wisconsin Division of Motor Vehicles immediately. To legally operate this vehicle, you are required to register it with the Division of Motor Vehicles.

MAIL ADDRESS:

Wisconsin Department of Transportation PO Box 7949 Madison, Wi 52707-7949

13-10-41-60540

BULLET 2

Euller Cas
2641 15th Street S



2000

0000000

Product Number Registration Number 13227L00091 95021132272 Fleet No. GRAY Expiration Date \$ 229.50 08/14/2014

YEAR

HOND

0000000 SINKOSS USA LLC 2641 15TH ST S LA CROSSE, WI 54601-6413

2HKRL1865YH606454

Buttet Cal 2641 15th Street S. La Crosse Wi 54601

This Registration Certificate is not a Title. Not Valid for Transfer of Ownership.

Contact the 414-266-1000 Division of Motor 608-266-1466 Vehicles at: www.dot.wisconsin.gov



NAME OF BUSINESS	BULLET		
ADDRESS <u>2709 SOUT</u>	A AVE SUI	TEAH'L	4 CROSSE WI 5460)
VEHICLE MAKE HONDA	MODEL (DDESTA	_year_ <i>2000</i>
	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)			
Parking Lamps			
Directional Lamps			
Flashing Warning Lamps			
Sidemarker 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	in 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>DISCLOSURE STATEMENT</u> : I am reasonable diligence in inspecting this be as indicated above.			
A.S.E. Certified Technician Signature	: March Mil	Printed	Name: Mot Kenn
Business Matt's Ando Repair	Address 4527	mormon Coalee R	ol. Date 11-4-13



WISCONSIN CERTIFICATE OF TITLE



Make Year Vehicle Identification Number SATURN 5GZDV23L15D207970 2005 Odometer Date Odometer Status Chassis Type Issue Date Title Number 10/02/2013 ACTUAL 180000 TRUK 10/02/2013 13275L4013-7 Product Number Body Style GRAY VAN 93437132753

Titled Owner(s)
SINKOSS USA LLC OR AHMAD MIAN M
2641 15TH ST S
LA CROSSE, WI 54601-6413

The person, firm or corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (liens) shown. The order in which the Lien Holders appear on this Title does not necessarily represent their priority. The Wisconsin Department of Transportation will not be responsible for false or fraudulent odometer statements made in the assignment of the Certificate of Title or for errors in reporting mileage, brand disclosures or the history of the vehicle. The department has no actual knowledge about the history of the vehicle and makes no warranty that the title brands or mileage disclosures on prior titles have been carried forward onto this document.

Lien Holder(s)

NONE.

Additional Vehicle Detail PREVIOUSLY TITLED IN: MN

SELLER: When the vehicle is sold, complete the ASSIGNMENT OF CERTIFICATE OF TITLE on the top back of this title and deliver the title to the purchaser with the vehicle. You may wish to retain a copy of this title with the purchaser's information and signature as proof of sale for your records.

PURCHASER: Apply for a new title with the Wisconsin Division of Motor Vehicles immediately. To legally operate this vehicle, you are required to register it with the Division of Motor Vehicles.

MAIL ADDRESS:

Wisconsin Department of Transportation PO Box 7949, Madison, WI 53707-7949 000081

13-1 454 548616

QUESTIONS: Contact the Division of Motor Vehicles at: 414-266-1000, 608-266-1466 www.dot.wisconsin.gov

KEEP IN SAFE PLACE

DO NOT KEEP IN VEHICLE

BULLET 3

Bullet Cab 2641 15th Street S. La Crosse Wi 54601



BULL3T 3 Vehicle Identification Number

0000000

AUT AUT TRUK

LA CROSSE, WI 54601-6413

SINKOSS USA LLC OR AHMAD HIAN M

5GZDV23L15D207970

2641 15TH ST S

Chassis

Gross Weight

2005

Α Make STRN

Expiration Date 04/29/2014

GRAY

0000000

13275L40137 Fleet No.

Amount Received

\$ 198.25

This Registration Certificate is not a Tale Not Waid for Transfer of Ownership.

Contact the 414-266-1000 Division of Motor 608-266-1466 Vehicles at: www.dot.wisconsin.gov



Buttet Cab 2641 15th Street S. La Crosse Wi 54601

NAME OF BUSINESS	BULLE	T CAB'	
ADDRESS <u>2709 S001</u>	H AVE. SUITE	E#H' LA	CROSSE W/ 5460
ADDRESS <u>2709</u> SOUT VEHICLE MAKE <u>SATURN</u>	MODEL	RELY 2	_year_ <i>2005</i>
	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)			
Parking Lamps			
Directional Lamps			
Flashing Warning Lamps			
Sidemarker Lamps/Reflectors		·	
Tail Lamps (incl. cover)			
Back Up Lamps			
Brake Lamps			
Steering System			V
Hood & Trunk Latches			
Emission/Exhaust System			
Tires (incl. spare & jack) (Note: tire-tread depth shall not be less the	an 2/32 of an inch)		
Windshield (incl. wipers & washers)			
Windows (side, rear)			
Windshield Defroster			
Horn			V
Mirrors			
Speed Indicator			
Restraining Devices & Seats			
Brakes (incl. parking brake)			
Heater			
Air Conditioning			
Door Handles (interior & exterior)			
DISCLOSURE STATEMENT: I am reasonable diligence in inspecting this be as indicated above.		-	
A.S.E. Certified Technician Signatur	e: Marton 2	Printed	Name: Mat Kanny
Business Mati's Alo Repair	Address <u>4527</u>	Marmon Contec F	Rd. Date 11.4-13
Sac 20 16/F)/1) Fach public passange	y vahiola ahali ha kant a	nd maintained in a safe ar	ed valiable condition. To income the

というからいないというないのできるのです。

SILVER/ALUMINUM



Vehicle Identification Number 1C3EL46T04N141279		Year 2004	Make CHRYSLER			
Title Number 13246L3026-2	09/03		Chassis Type AUTO	Odometer Reading	Odometer Status ACTUAL	Odometer Date 09/03/2013
Product Number	Body Style		Color		Fleet No.	

4DR SEDAN

Titled Owner(s) SINKOSS USA LLC 2641 15TH ST S LA CROSSE, WI 54601-6413

The person, firm or corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (liens) shown. The order in which the Lien Holders appear on this Title does not necessarily represent their priority. The Wisconsin Department of Transportation will not be responsible for talse or fraudulent odometer statements made in the assignment of the Certificate of Title or for errors in reporting mileage, brand disclosures or the history of the vehicle. The department has no actual knowledge about the history of the vehicle and makes no warranty that the title brands or mileage disclosures on prior titles have been carried forward onto this document. 1C3EL46T04N141279

Lien Holder(s)

19564132461

NONE.

Additional Vehicle Detail PREVIOUSLY TITLED IN: ID

SELLER: When the vehicle is sold, complete the ASSIGNMENT OF CERTIFICATE OF TITLE on the top back of this title and deliver the title to the purchaser with the vehicle. You may wish to retain a copy of this title with the purchaser's information and signature as proof of sale for your records.

PURCHASER: Apply for a new title with the Wisconsin Division of Motor Vehicles immediately. To legally operate this vehicle, you are required to register it with the Division of Motor Vehicles

MAIL ADDRESS: Wisconsin Department of Transportation PO Box 7949, Madison, WI 53707-7949

13-1-41433334

QUESTIONS: Contact the Division of Motor Vehicles at: 414-266-1000, 608-266-1466

CAR

Bullet Cab 2641 15th Street S La Crosse Wi 54601



692VGC Vehicle Identification Number

0000000 SINKOSS USA LLC 2641 15TH ST S

1C3EL46T04N141279

AUT AUT AUTO

LA CROSSE, WI 54601-6413

Chassis

Period Gross Weight Α Year

2004

Make CHRY Product Number 25516132463

Registration Number 13246L30262

00000000

Fleet No. SILVER/ALUMINUM

Expiration Date 08/22/2014 Amount Received \$ 74.50

This Registration Certificate is not a Title Not Valid for Transfer of Ownership.

Contact the 414-266-1000 Division of Motor 608-266-1466 Vehicles at: www.dot.wisconsin.gov



Bullet Cab 2641 15th Street S. La Crosse Wi 54601

NAME OF BUSINESS	BULLE	T CAB'	
name of business address <u>2709</u> SouTh	I AVE. SUIT	EH H' L	A CROSSE WI 5460
VEHICLE MAKE <u>CHRYS</u> E		EBRING	A CROSSE WI 5460 YEAR 2004
	NEEDS REPAIR	DATE OF REPAIR	NO REPAIR NECESSARY
Headlamps (incl. cover and aim)			
Parking Lamps			
Directional Lamps			
Flashing Warning Lamps			
Sidemarker 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 that	n 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>DISCLOSURE STATEMENT</u> : I am reasonable diligence in inspecting this v be as indicated above.			
A.S.E. Certified Technician Signature		•	Name: Mot Kommel
Business Mt > Ato Repr	Address <u> </u>	mor man Conles	RJ Date 11-4-13