

## HORSE-DRAWN VEHICLE CLK148/149 (rev. 11/17) CITY ORDINANCE 14.025

OFFICE USE ONLY				
DATE FILED:				
INITIALS:				
MUNI FINES DUE: Yes No				
PP TAX DUE: Yes No				
SELLER'S PERMIT: Yes No				
ADVERSE: Yes No				
LD: CC:				

□ 1 YEAR (CLK148)		Fee: \$150.00 *	Expires: Dece	Expires: December 31,		
□ 6 MONTHS OR LESS (CLK149)		Fee: \$75.00 *	Expires: Dece	Expires: December 31,		
* \$25.00 Per Each	n Additional Vehicl	e				
_icensee Name:	COF	RPORATION, PARTNERSHIP, O	R INDIVIDUAL	Dist	rict #: _	
Frade/Event Addre	SS:STRE	ET CIT'	Y	STATE		ZIP
		Email:			dress is G	
	olicants/Partners Must B		(conceptitue live li	55 Yiu Einaii II Au	u. 000 10 O	
a) Full Name	:			DOB:	1	
Address: _	STREET	CITY ST.	ATE ZIP	Phone:		
Partnership or Co	orporation, list for A	ALL members/partne	<b>'s</b> :			
a) Full Name:	:			DOB:	1	
Address: _	STREET	CITY ST.	ATE ZIP	Phone:		
				DOB:	1	1
Address: _	STREET	CITY ST.	ATE ZIP	Phone:		
PLEASE NO	TE: If you need addit	ional lines, you may attach	a separate page to thi	s application		
. Number of Hors	e Drawn Vehicles:					
. Are all owned or	r leased vehicles r	oadworthy and in a god	od state of repair?	□ Yes □ No		
. Hours of Operat	tion:					
		Horse-Drawn Vel	nicle, Page 1			

4.	Describe the Route:
5.	Submit & Maintain an insurance policy written by one or more insurers licensed to do business in the State of WI, in the amount of \$100,000 per person and \$300,000 per occurrence, covering death, personal injury and property damage. $\Box$ <b>Attached</b>
6.	The insurance policy MUST list:  □ City of Kenosha as Additional Insured  □ Notification of at least 20 Days in Advance of Cancellation (Must be stated on certificate or the cancellation policy notice must be attached to certificate)
7.	Seller's Permit must be attached:   Attached
8.	Submit a statement from a veterinarian that the horse(s) to be utilized are in good health. (With respect to a Permit, applicant, if no such report is available, may sign a statement that to the best of his/her knowledge, the horse(s) to be utilized are in good health.)   Attached
9.	Each individual, sole proprietor, partner and corporate officer must fill out and attach "Applicant's Report of Police Record".       Attached
10	.Have you obtained a current copy of §14.025 of the Code of General Ordinances? □ <b>Yes</b> □ <b>No</b>
11	. Have you ever previously applied for a Horse Drawn Vehicle License? □ Yes □ No
	If Yes, was the previous application denied? □ Yes □ No
	If Yes, explain:
	in 100, explain.
12	If you previously held the license applied for, was it ever suspended or revoked? □ <b>Yes</b> □ <b>No</b>
	If Yes, explain:
	<b>PLEASE READ CAREFULLY BEFORE SIGNING:</b> I/we have read, understand, and will comply with the General Operator Requirements. City Ordinance 14.025.
	Individual/Partner/Member Signature Date
	GENERAL OPERATOR REQUIREMENTS
Н	orse drawn vehicles shall be operated, at all times while within the City, in accordance with the following requirements:
1. 2. 3. 4. 5.	Horses utilized to pull vehicles shall be in good health, sufficient to safely accomplish said task.  Vehicles shall be in compliance with Chapter 347, Wisconsin Statues, with respect to lamps, identification emblem, and slow-moving vehicle signs.  Horses shall be diapered to retain deposits of urine and fecal matter, and vehicles shall contain equipment to clean up same. Urine and fecal matter must be cleaned up promptly so as not to be a nuisance or health hazard.  Operators must be eighteen (18) years of age or older and have a valid Wisconsin Driver's License, except in the case of an individual who is a member of a branch of the Armed Services, having a valid driver's license from the State he/she declares as his/her residence, and residing within Kenosha County while in service.  Operators may not obstruct vehicular or pedestrian traffic or create a nuisance.  Operators shall not permit any passenger to sit alongside the drive while the vehicle is moving.
8. 9.	



## APPLICANT'S REPORT – POLICE RECORD CLK001 (rev. 08/17)

Last Name:	First N	ame: Appears On Driver's License O	MI:	:
(NOTE: Name	Must Appear Exactly As It	Appears On Driver's License O	r State ID)	
Home Address:				
STRE	EET	CITY	STATE Z	ZIP
Date of Birth:	Driver's License #	:		
		STATE	NUMBER	
License Applied For:				
PLEASE NOTE: You may purchase a c Safety Building, 1000-55th St. Addition Note: You must write your tickets, char	ally, check the WI Circu	uit Court Access website to	o obtain your circuit court rec	cords.
<ol> <li>Have you <u>ever</u> received any <b>tick</b></li> <li>If yes, provide: Charge, State, D</li> </ol>	ate, Result (Include	pending charges.)	•	
(Examples: Speeding, WI, 5/8	3/2012, Guilty   Theft, F	L, 5/22/2014, Dismissed	DUI, WI, 6/30/2017, Pending	g)
CHARGE	STAT	TE DATE	RESULT	
2. Have you <u>ever</u> had your <b>driver's</b> If yes, provide: Charge, State, Da		l or <b>revoked</b> <u>in any stat</u>	<u>te</u> ? □ Yes □ No	
CHARGE	STAT	ΓE	DATE	

	CHARGE	STATE		DATE			
ir	lave you <u>ever,</u> while operating a bunyolving unfair trade practices, une yes, provide: Charge, State, Date	thical conduct, or discrimin	ation <u>in any state</u> ? 🛭				
	CHARGE	STATE	DATE	RESULT			
	ist the name and address of all emathe past five (5) years:	nployers for which you have	worked and/or busin	nesses you have operated			
	lave you lived at your current home no, please list all addresses which			No			
b	Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, you may be subjected to the penalties specified in 1.22 of the Code of General Ordinances, which is printed on the bottom of this application.   NITIAL						
	Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, the license may be denied?   INITIAL						
Ā	pplicant Signature	Date					
.22 L	ICENSE/PERMIT APPLICATIONS - CODE (	OF GENERAL ORDINANCES					
t shal utho vhich	rohibition I be unlawful for any person, acting as an indirize any person to do so on their behalf, a licer was known by said person to be untrue, incor, if known to the granting authority, would be a	nse or permit application which is no rrect and/or incomplete. The term "i	ot true, correct and/or compl n all material respects" shall	ete in all material respects and			
) Ar ne pa een	enalty  ny person violating Subsection A. above, shall,  nyment of the costs of prosecution, and, in defi- paid, but not to exceed a period of thirty (30) of  the license or permit granting authority may granting authority may granting authority may granting authority may granting under circumstances when date of granting under circumstances when	ault of the timely payment thereof, s days.	hall be committed to the Co	unty Jail until such forfeiture has od not to exceed thirty (30) days			

## 1.225 ADMINISTRATIVE CHARGE FOR PROCESSING LICENSE/PERMIT APPLICATIONS

The first Twenty-five (\$25) Dollars of the application fee for any License/Permit shall be retained by the City in the event of a License/Permit denial or the withdrawal of the application by applicant for administrative and processing costs, and the balance, if any, refunded to the applicant. Where the application fee is less than Twenty-five (\$25) Dollars, the entire application fee shall be retained by the City for administrative and processing costs.

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