



OFFICE USE ONLY	
DATE FILED:	_____
INITIALS:	_____
MUNI FINES DUE:	Yes No
PP TAX DUE:	Yes No
OCC. PERMIT:	Yes No
SELLER'S PERMIT:	Yes No
ADVERSE:	Yes No
LP:	_____ CC: _____
LETTER:	_____

**TAXICAB**  
**CLK143 (rev. 11/17)**  
 CITY ORDINANCE 13.07

Fee: \$75.00/Per Vehicle  
 IF THIS IS A TRANSFER, FEE IS \$20.00 PER # OF CABS LISTED ON AFFIDAVIT.

I hereby apply for permit to engage in the business of conveyance of persons for hire (taxicab) within the City of Kenosha to and including the 30th day of June, \_\_\_\_\_.

**THE FOLLOWING QUESTIONS MUST BE ANSWERED (PLEASE PRINT).**

Licensee Name: \_\_\_\_\_  
CORPORATION, PARTNERSHIP, OR INDIVIDUAL

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
STREET ZIP

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

How would you like to receive your license?: \_\_\_\_\_ Pick Up \_\_\_\_\_ Mail

The following items **must be attached** to this application before filing:

1. Taxi cab listing, which identifies \_\_\_\_\_ number of cabs.  **Attached**
2. "Applicant's Report of Police Record". The Police Department will verify the information and forward their report to the City Attorney, who will make a recommendation as to whether or not applicant is of sufficient moral character to be entitled to the privilege of being awarded a taxicab permit.  **Attached**
3. Seller's Permit must be attached:  **Attached**
4. Insurance policy providing coverage for liability of a minimum of Twenty-Five Thousand Dollars (\$25,000.00) for injury or death to any one person, and subject to the same limit per person, a maximum liability of Fifty Thousand Dollars (\$50,000.00) for the injury or death of any number of persons in any one accident and a maximum liability of Ten Thousand Dollars (\$10,000.00) for property damage in any one accident, containing the provision for Fifty Dollars (\$50.00) deductible insurance on the property damage only; or, a certificate of insurance acceptable to the State of Wisconsin. Said policy or certificate shall further provide that the same **cannot be canceled until thirty (30) days notice of such cancellation shall be given to the City Clerk.**  
 **Attached**







## TAXI CAB SAFETY AND PERFORMANCE CHECKLIST

LICENSEE NAME (OWNER): \_\_\_\_\_ TAXI CAB COMPANY NAME: \_\_\_\_\_  
 TYPE OF INSPECTION:  New  Renewal  6 Month VEHICLE INSPECTED: MAKE: \_\_\_\_\_ YEAR: \_\_\_\_\_  
 VEHICLE IDENTIFICATION NO.: \_\_\_\_\_ STATE LICENSE PLATE NO.: \_\_\_\_\_

WALK AROUND INSPECTION	UNDER HOOD	
Operation of all exterior lights.	Check radiator for leaks/looseness.	Transmission/trans axle mounts.
All reflectors and lenses.	Check nonelectric cooling fan for play.	Drive line/U-joints/support bearings.
Mirror mounts and glass.	Pressure test cooling system.	Engine exhaust system.
Vehicle body/paint.	Coolant hoses/recovery system.	Inspect rear axle for oil leaks (if applicable).
Bumpers.	Record coolant protection level.	Rear suspension.
Hood/door/truck hatch hinges.	Pressure test radiator cap.	Rear brakes and hydraulic lines.
Windshield/windows.	Tension/Condition of all belts.	Parking brake cables/operation.
Roof.	Power steering fluid level/hoses.	Record rear brake lining thickness.
<b>INTERIOR</b>	All accessory mounts/brackets.	Inspect rear brake drum/rotor condition.
Seats/seat belts/shoulder harness.	Fuel throttle linkage/cables.	Fuel tank/supports/lines/cap.
Door locks/latches/releases.	Check engine for major oil leaks.	<b>DRIVE TEST</b>
Floorboard and covering.	Integrity of air intake system.	Operation of vehicle systems at normal operating temp.
Interior lighting.	Wiring/connections to electrical devices.	Engine throttle response & performance
Instrument panel warning lights/gauges.	Battery area.	Observe exhaust for excessive smoke emissions.
Engine operation.	Check/record battery state of charge and load test.	Transmission/clutch operation.
Horn operation.	Ignition/distributor system.	Operation of all gauges & indicators.
Heater-A/C-Defroster controls.	Emissions related component-visual.	Steering wheel travel or bind.
Rear view mirror/sun visors.	Check all fluid levels.	Observe road handling.
Parking brake operation.	<b>UNDER CAR/CHASSIS</b>	Test brake operation at various road speeds.
Windshield, door and rear glass.	Steering gear/rack & pinion mounts.	Parking brake operation.
Switches & accessories operation.	Steering shaft and linkage.	Listen for any unusual noises.
Steering wheel free travel.	Check ball joints for wear.	
Clutch pedal free travel (if applicable)	Check struts/shocks for leaks.	
<b>TIRES/WHEELS</b>	Front wheel bearing adjustment.	
Irregular wear (alignment).	C.V. shafts and boots.	
Cuts and sidewall damage.	Front brakes and hydraulic lines.	
Inspect valve caps.	Front brake drum/rotor condition.	<b>Wear limits, out of service criteria and specifications are obtained by the vehicle or component manufacturer. Accepted industry standards, practices and methods should be followed while performing the inspections.</b>
Inspect thread depth at three locations - 2/32" min.	Record front brake lining thickness.	
Record thread depth for each tire.	Record front brake rotor thickness.	
Check/record tire pressures. Include spare tire.	Brake vacuum/hydro boost operation.	
Wheel nut torque.	Front springs and mounts	
Missing or damaged axle studs.	Engine supports/cushions.	
Bent/damaged wheels.	Starter and cables.	
Check for spare & jack/lug wrench.	Check for under car fluid leaks.	

NAME OF BUSINESS PERFORMING INSPECTION: \_\_\_\_\_ DATE OF INSPECTION: \_\_\_\_\_  
 NAME OF PERSON PERFORMING INSPECTION: \_\_\_\_\_ DATE OF INSPECTION: \_\_\_\_\_  
 A.S.E. CERTIFICATE NUMBER: \_\_\_\_\_ EXPIRES: \_\_\_\_\_ INSPECTOR'S SIGNATURE: \_\_\_\_\_

**(ATTACH COPY OF CERTIFICATE)**



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

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
 (NOTE: Name Must Appear Exactly As It Appears On Driver's License Or State ID)

Home Address: \_\_\_\_\_  
 STREET CITY STATE ZIP

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_  
 STATE NUMBER

License Applied For: \_\_\_\_\_

**PLEASE NOTE:** You may purchase a copy of your record for \$0.50 per page at the Records Department in the Public Safety Building, 1000-55th St. Additionally, check the WI Circuit Court Access website to obtain your circuit court records. Note: You must write your tickets, charges, citations, or offenses on the application. Do not attach copies of records.

1. Have you ever received any **tickets** or been charged with any **crimes** or **felonies** in any state?  **Yes**  **No**  
 If yes, provide: Charge, State, Date, Result (Include pending charges.)  
 (Examples: Speeding, WI, 5/8/2012, Guilty | Theft, FL, 5/22/2014, Dismissed | DUI, WI, 6/30/2017, Pending)

CHARGE	STATE	DATE	RESULT

2. Have you ever had your **driver's license suspended** or **revoked** in any state?  **Yes**  **No**  
 If yes, provide: Charge, State, Date

CHARGE	STATE	DATE

3. Have you ever served or been sentenced to serve time in **jail or prison in any state**?  **Yes**  **No**  
 If yes, provide: Charge, State, Date

CHARGE	STATE	DATE

4. Have you ever, while operating a business or engaged in a profession, been convicted of any charges involving unfair trade practices, unethical conduct, or discrimination **in any state**?  **Yes**  **No**  
 If yes, provide: Charge, State, Date, Result (Include pending charges.)

CHARGE	STATE	DATE	RESULT

5. List the name and address of all employers for which you have worked and/or businesses you have operated in the **past five (5) years**:

\_\_\_\_\_

\_\_\_\_\_

6. Have you lived at your current home address for the **past (5) five years**?  **Yes**  **No**  
 If no, please list all addresses which you have resided at in the past (5) five years:

\_\_\_\_\_

\_\_\_\_\_

7. 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.  **Yes** \_\_\_\_\_

INITIAL

8. Do you, the applicant, understand that if any of the information provided is false, and/or incomplete, the license may be denied?  **Yes** \_\_\_\_\_

INITIAL

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

**1.22 LICENSE/PERMIT APPLICATIONS – CODE OF GENERAL ORDINANCES**

**A. Prohibition**

It shall be unlawful for any person, acting as an individual, a partner, a corporate officer, or an agent, to execute or file with any City Department, or to authorize any person to do so on their behalf, a license or permit application which is not true, correct and/or complete in all material respects and which was known by said person to be untrue, incorrect and/or incomplete. The term "in all material respects" shall mean with respect to some fact, which, if known to the granting authority, would be a basis or a consideration for license or permit denial.

**B. Penalty**

1) Any person violating Subsection A. above, shall, upon conviction thereof, be subject to a forfeiture not to exceed Five Hundred (\$500) Dollars, plus the payment of the costs of prosecution, and, in default of the timely payment thereof, shall be committed to the County Jail until such forfeiture has been paid, but not to exceed a period of thirty (30) days.

2) The license or permit granting authority may grant, but withhold the issuance of, any license or permit for a period not to exceed thirty (30) days from the date of granting under circumstances wherein an application is found by the granting authority to have violated Section A. above, and the applicant was provided with an opportunity to appear before the granting authority. The granting authority may also issue a written warning to the applicant which shall be made part of their license/permit record for two (2) consecutive license/permit years. Where such finding and penalty is made and imposed by other than the Common Council, applicant may, within ten (10) days of receipt of oral or written notice of the imposition of any such penalty, whichever is first, if both oral and written notice is provided, file a Notice of Appeal with the City Clerk and have such matter reviewed by the Common Council.

**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.

*Applicant's Report – Police Record, Page 2*

**CITY OF KENOSHA**  
**TAXI ZONE MAP**

----- Municipal Boundary  
————— Taxi Zone Boundary

DCD - RAF - City Plan Division - 11/09/94 - TZ

