

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

DAILY HORSE-DRAWN VEHICLE

CLK147 (rev. 11/17)
CITY ORDINANCE 14.025

Fee: \$25.00/Day*

**\$25.00 Per Each Additional Vehicle*

Date(s) of Event: _____

Description of Event: _____

Licensee Name: _____ District #: _____
CORPORATION, PARTNERSHIP, OR INDIVIDUAL

Trade/Event Name: _____

Trade/Event Address: _____
STREET CITY STATE ZIP

Phone Number: _____ Email: _____
(Correspondence Will Be Via Email If Address Is Given)

If Individual, list (Applicants/Partners Must Be 18 Years Old):

a) Full Name: _____ DOB: ____ / ____ / ____

Address: _____ Phone: _____
STREET CITY STATE ZIP

If Partnership or Corporation, list for **ALL members/partners**:

a) Full Name: _____ DOB: ____ / ____ / ____

Address: _____ Phone: _____
STREET CITY STATE ZIP

b) Full Name: _____ DOB: ____ / ____ / ____

Address: _____ Phone: _____
STREET CITY STATE ZIP

PLEASE NOTE: If you need additional lines, you may attach a separate page to this application

1. Number of Horse Drawn Vehicles: _____
2. Are all owned or leased vehicles roadworthy and in a good state of repair? **Yes** **No**
3. Hours of Operation: _____

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. **Attached**
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? **Yes** **No**
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: _____

12. If you previously held the license applied for, was it ever suspended or revoked? **Yes** **No**

If Yes, explain: _____

PLEASE READ CAREFULLY BEFORE SIGNING: I/we have read, understand, and will comply with the General Operator Requirements. City Ordinance 14.025.

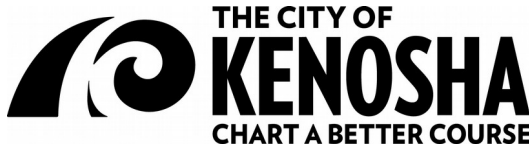
 Individual/Partner/Member Signature

 Date

GENERAL OPERATOR REQUIREMENTS

Horse drawn vehicles shall be operated, at all times while within the City, in accordance with the following requirements:

1. Vehicles shall be roadworthy, in good repair, and in a clean, safe, and sanitary condition.
2. Horses utilized to pull vehicles shall be in good health, sufficient to safely accomplish said task.
3. Vehicles shall be in compliance with Chapter 347, Wisconsin Statutes, with respect to lamps, identification emblem, and slow-moving vehicle signs.
4. 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.
5. 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.
6. Operators may not obstruct vehicular or pedestrian traffic or create a nuisance.
7. Operators shall not permit any passenger to sit alongside the drive while the vehicle is moving.
8. Operators may not operate any vehicle in excess of the weight and/or passenger capacity which it is built to accommodate.
9. Operators may not operate the vehicle between the hours of 7:00 AM to 9:00 AM and 3:00 PM to 6:00 PM, Monday through Friday on the following streets: 52nd Street, from Sheridan Road to 30th Avenue; 22nd Avenue, from Washington Road to 75th Street; Sheridan Road, from Washington Road to 75th Street; and 75th Street, from Sheridan Road to 30th Avenue.
10. Operators shall obey the Rules of the Road for motor vehicles with respect to the operation and parking of motor vehicles.



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.