## Taxicab License Application

Pursuant to Madison General Ordinance 11.06

Fee: \$2,200/two years (\$1,200/initial year) + \$65/vehicle Renewal Fee: \$2,200/two years + \$65/vehicle

| 1. Applicant Name Jodie Schmidt  | ·  | Home Phone # _ | 608-575-3777  |
|--|--|----------------|---------------|
| Home Address1366 Judd Road- Ore  | gon Wisconsin 53575                              |                |               |
|  |  |                |               |
| 2. Company Name Green Cab of Mac   | lison Incorporated - dba Green Cab               |                |               |
| Business Address1621 Beld Street   | et   |                |               |
| Business Telephone Number 6  | 08-255-1234                                      |                |               |
| i i  |  |                |               |
| 3. Indicate method of operation and t  | ype of fare collection:                          |                |               |
| Flate Rate   | Number of Vehicles                               |                |               |
| Zone X   |  |                |               |
| Meter  |  |                |               |
| Airport Shuttle  |  |                |               |
| •  |  |                |               |
| Total number of vehicles proposed  | I to be operated31                               |                |               |
| 5. List your schedule of rates to be cl  | may have other color's ) with leaf motif. Digita |                |               |
| ·  | Out of Zone fare = 25 cents                      |                |               |
| Zone Rate based on current city of Madison<br>Shared: \$7 initial , \$1.25 each additional zone<br>Direct Ride \$ 9.50 initial zone, \$1.75 each add | Wait time = .60 cents / mir                      |                |               |
| 6. Name of Insurance Companyint  | egrity Insurance                                 |                | =             |
| Business Address 401 Data Court, I   | Debuque , Iowa 52003                             |                | 3             |
| Business Telephone Number  |  |                |               |
| <i>1</i>   |  |                |               |
| 7. Name of Insurance Agent Kunk  | de & Associates - Abby Zahorik                   |                |               |
| Business Address 3220 Syene  |  |                | ECEIVE        |
| Business Telephone Number  |  | n              | MAY OF ONE    |
| 21   |  | 20             | MAT 0 7 2019  |
|  |  | n n n          | DISCON CUERTO |

| Name                             |   | Address         |                                       |                  |              |
|----------------------------------|---|-----------------|---------------------------------------|------------------|--------------|
| John Schmidt                     |   | 1621 Bel        | d Street MAdison Wisconsin            | 53715            |              |
| Jodie Schmidt<br>Michael Schmid  | it .  | Same            |                                       |                  |              |
| With a contract                  | A   | Same            |                                       | •                |              |
|                                  |   |                 |                                       |                  |              |
| 9. Is applicant a partn          | nership?Yes   | X No            |                                       |                  |              |
| If yes, give names               | and address of all partners:  |                 |                                       |                  |              |
| Name                             |   | Address         |                                       |                  |              |
|                                  |   |                 |                                       | <u> </u>         |              |
|                                  |   |                 |                                       |                  |              |
|                                  |   |                 |                                       |                  |              |
| •                                | ensed are mortgaged, give i   | name and addr   | ess of mortgagee, ve                  | hicle serial num | nber, amount |
| of mortgage and fi               | ulfillment date:  |                 |                                       |                  |              |
| Name                             | Address   |                 | Vehicle Serial #                      | \$               | Fulfillment  |
|                                  |   |                 |                                       |                  | Date         |
| NA                               |   |                 |                                       |                  |              |
|                                  |   |                 | •                                     |                  |              |
|                                  |   |                 | · · · · · · · · · · · · · · · · · · · |                  |              |
|                                  |   |                 |                                       |                  |              |
| Madison pertaining to            | ree that he/she has read and<br>the licensing and regulatin<br>linances of the City and law<br>No | g of taxicabs i | n the City of Madiso                  |                  |              |
| Subscribed and sworn             | before me   |                 | <i>a</i> . /                          | ) (j             | )            |
| this 7th day of                  | May , 20 19   | *               | Applicant's Signature                 | renew 4          |              |
| and ?                            | No  | _               | Applicant s Signature                 |                  |              |
| Notiry Public My Commission Expi | res 17 21 286 25M 40  |                 |                                       |                  |              |
| Gry Commission Expi              | WIFER S. HAAR<br>ARY PUBLIC 12 Is said  | TON<br>TATATE   |                                       |                  |              |

## Taxicab Filing Affidavit

| State of Wisconsin )   |  |
|--|--|
| County of Dane )   |  |
| , being first duly   | sworn on oath, deposes and says:                   |
| 1. That the affiant owns, or managed doing business as Green Cab   |  |
| 2. That as of the date of this Affidavit, (Company Name)   | Green Cab Of Madison,                              |
| (Address)1621 Beld Street  | , Madison, Wisconsin, doing business as            |
| Green Cab  | , was the owner of the vehicles listed on Schedule |
| A shown on the reverse side of this Affidavit and incorp   | porated herein.                                    |
| 3. That the schedule of fares to be charged in the operation taxicab is: (check boxes to indicate which taxicab rates  |  |
| Ordinances.  | ent to Section 11.06(9)(a) of the Madison General  |
| The Zone Taxicab Rates authorized pursuar Ordinances.  | nt to Section 11.06(9)(b) of the Madison General   |
| The Airport Shuttle Rates authorized pursua Ordinances.  | ant to Section 11.06(9)(c) of the Madison General  |
| The Flat Rate authorized pursuant to Section   | n 11.06(9)(d) of the Madison General Ordinances.   |
| 4. a) That attached to this Affidavit for deposit with the Ci<br>Insurance specifying insurance coverage of the types<br>Madison General Ordinances, and specifically indica<br>vehicle identified on the said Schedule A; and | and amounts required by Section 11.06(8) of the    |
| b) That also attached to said Policy or Certificate of Lia the State of Wisconsin Insurance Commissioner show authorized to transact automobile insurance business   | ving the insurance company is licensed and         |
| c) That said insurance policy contains a provision that the<br>its term except upon thirty days' written notice to the   | <u> </u>   |
| 5. That this Filing Affidavit is made to comply with the pr<br>Ordinances described herein.  | rovisions of Section 11.06 of the Madison General  |
|  |  |
| Subscribed and sworn before me   |  |
| this 7th day of May NSNOOSIM 10 3  Noterly Public HAAH 10  My Commission Expires 1-21-2023   | Signature of person signing Affidavit under oath   |

## Company Name

| Model<br>Year | Class &<br>Make | State<br>License | Owner/<br>Title Holder  | Serial/Engine #   | Perm |
|---------------|-----------------|------------------|-------------------------|-------------------|------|
| 2015          | Prius           | 316-XAC          | South Side Brothers LLC | JTDKN3DU1F1889709 | 311  |
| 2015          | Prius           | 317-XAC          | South Side Brothers LLC | JTDKN3DU9F1872897 | 312  |
| 2015          | Prius           | 747-YEN          | South Side Brothers LLC | JTDKN3DU7F0480572 | 313  |
| 2017          | Prius           | ABK8888          | South Side Brothers LLC | JTDKBRFU9H3052528 | 314  |
| 2015          | Prius           | 318-XAC          | South Side Brothers LLC | JTDKN3DU2F0414494 | 316  |
| 2017          | Prius           | ABK8887          | South Side Brothers LLC | JTDKBRFU6H3052857 | 317  |
| 2016          | Prius           | 876-zcw          | South Side Brothers LLC | JTDKBRFU3G3021273 | 318  |
| 2013          | Prius           | 760-Vts          | South Side Brothers LLC | JTDKN3DU1D5701910 | 319  |
| 2015          | Prius           | 749-YEN          | South Side Brothers LLC | JTDKN3DU1F1998817 | 321  |
| 2016          | Prius           | 277-ZHZ          | South Side Brothers LLC | JTDKBRFU9G3021844 | 322  |
| 2016          | Prius           | 275-ZHZ          | South Side Brothers LLC | JTDKBRFU2G3503443 | 323  |
| 2017          | Prius           | 276-ZHZ          | South Side Brothers LLC | JTDKBRFU4H3031358 | 325  |
| 2013          | Prius           | 661-UMT          | South Side Brothers LLC | JTDKN3DU2D5552262 | 326  |
| 2015          | Prius           | 748-YEN          | South Side Brothers LLC | JTDKN3DU8F0481147 | 328  |
| 2017          | Prius           | 150-ZUT          | South Side Brothers LLC | JTDKBRFU9H3028567 | 329  |
| 2017          | Prius           | ABK7607          | South Side Brothers LLC | JTDZN3EU2HJ073625 | 333  |
| 2015          | Prius           | 291-XHG          | South Side Brothers LLC | JTDKN3DU9F0440865 | 334  |
| 2012          | Prius           | 854-ZLA          | South Side Brothers LLC | JTDKN3DUXC5467877 | 335  |
| 2012          | Prius           | 853ZLA           | South Side Brothers LLC | JTDKN3DU6C5465446 | 336  |
| 2017          | Prius           | 149-ZUT          | South Side Brothers LLC | JTDKBRFUXH3546655 | 337  |

| 2016 | Prius   | 877-ZCW | South Side Brothers LLC | jtdkbrfu7g3010180 | 338 |
|------|---------|---------|-------------------------|-------------------|-----|
| 2013 | Prius   | 622-UMT | South Side Brothers LLC | JTDKN3DU6D5544777 | 340 |
| 2013 | Prius   | 621-UMT | South Side Brothers LLC | JTDKN3DU9D5546183 | 344 |
| 2013 | Prius   | 446-URK | South Side Brothers LLC | JTDKN3DU3D5562198 | 345 |
| 2015 | Prius   | 750-YEN | South Side Brothers LLC | JTDKN3DU4F1990243 | 346 |
| 2013 | Prius   | 443-URK | South Side Brothers LLC | JTDKN3DU2D5573581 | 347 |
| 2013 | Prius   | 762-VTS | South Side Brothers LLC | JTDKN3DU3D1724127 | 350 |
| 2013 | Prius   | 758-VTS | South Side Brothers LLC | JTDKN3DU3D5699268 | 351 |
| 2011 | Prius   | ach2409 | South Side Brothers LLC | JTDKN3DU6B0260544 | 352 |
| 2015 | Prius   | 319-xac | South Side Brothers LLC | JTDKN3DU9F0412337 | 353 |
| 2009 | GMC Van | GW 2137 | South Side Brothers llc | 1GJHG39K191103223 | 320 |

## City of Madison -- Taxicab Rate Schedule

| METER RATES                       |   |   |   |  |
|-----------------------------------|---|---|---|--|
| In Town                           |   |   |   |  |
| "DROP" Distance                   | MI  | "DROP" Charge \$  |   |  |
| Additional Distance MI            |   |   |   |  |
| Wait Time                         | Seconds   | Wait Charge \$  |   |  |
| Out of Town                       |   |   |   |  |
| "DROP" Distance                   | MI  | "DROP" Charge \$  |   |  |
| Additional Distance               | MI  |   |   |  |
| Wait Time                         |   |   |   |  |
| VAN RATES (LARGE PAR              | TY—6 OR MORE PASS   | ENGERS)   | A A A   |  |
| In Town                           |   |   |   |  |
| "DROP" Distance                   | MI  | "DROP" Charge \$  |   |  |
| Additional Distance               | · MI  | Additional Charge \$  |   |  |
| Wait Time                         | Seconds   | Wait Charge \$  |   |  |
| Out of Town                       |   |   |   |  |
| "DROP" Distance                   | MI  | "DROP" Charge \$  |   |  |
| Additional Distance               | MI  |   |   |  |
| Wait Time                         | Seconds   | Wait Charge \$  |   |  |
| ZONE RATES                        |   |   |   |  |
| First Zone Charge \$Shar          | red = \$5 Direct = \$7.50   |   |   |  |
| Additional Zone(s) Charge         | \$ Shared = \$1.25 Direct =   | \$1.75  |   |  |
| Additional Passenger Char         | ge \$Both = \$1 (for  | passengers making the same trip as the fi   | rst passenger)  |  |
|                                   |   | Outer Zone Charge \$  |   |  |
| Wait Time Both = 60               | Seconds   | Wait Charge \$Both=   | .60 cents   |  |
| FLAT RATES additional zones.      | rligh demand rates: Currently in<br>1, 2019 Summer of 2019" rates<br>Direct Ride= \$7.50 first zone, \$ | n place on lile wicity of Madison No<br>will go into effect. June 1 2019 thru S<br>31.75 additional zones | change ".<br>September 1, 2019= \$5 Shared Ride first zone \$1.25 |  |
| "DROP" Distance                   | MI  |   |   |  |
| Single Passenger "DROP" Charge \$ |   | Additional Passenger  | "DROP" Charge \$  |  |
| Additional Distance               | MI  |   |   |  |
| Single Passenger "DROP" Charge \$ |   | Additional Passenger  | "DROP" Charge \$  |  |
| LIMOUSINE RATES                   |   |   |   |  |
| Zone 1 Charge \$                  | per passenger   | Zone 6 Charge \$  | per passenger   |  |
| Zone 2 Charge \$                  | per passenger   | Zone 7 Charge \$  | per passenger   |  |
| Zone 3 Charge \$                  | per passenger   | Zone 8 Charge \$  | per passenger   |  |
| Zone 4 Charge \$                  | per passenger   | Zone 9 Charge \$  | per passenger   |  |
| Zone 5 Charge \$                  | ner nassenger   |   |   |  |

| HOURLY RATE  |  |                 |                                      |  |
|--|--|-----------------|--------------------------------------|--|
| \$   | _ per hour                                       |                 |                                      |  |
| DATES FOR OTHER SERVICE                                | =6   |                 |                                      |  |
| RATES FOR OTHER SERVICE                                | :0   |                 |                                      |  |
| Personal Baggage:                                      | First two articles                               |                 | <b>-</b>                             |  |
| Groceries Carried to Door:                             |  |                 | each (except trunks and footlockers) |  |
| Groceries Carried to Door.                             | First two bags Free Additional bags \$ .25 cents |                 |                                      |  |
| Trunks and Footlockers:                                | \$\$1.00   |                 |                                      |  |
| Aids to Handicapped People:                            |  |                 |                                      |  |
| AIRPORT FEE  |  |                 |                                      |  |
|  | ner vehicle (may not e                           | xceed the fee i | mposed by Dane County)               |  |
|  |  |                 |                                      |  |
| Company:   | <del></del>                                      |                 |                                      |  |
| Proposed Effective Date:                               | September -2010                                  |                 |                                      |  |
| Submitted by:  | Duneal   |                 |                                      |  |
| J. J. C.   | (Signatur  | e)              |                                      |  |
|  |  |                 |                                      |  |
|  | (Type or Print                                   | Name)           |                                      |  |
| This schedule must be subm<br>proposed effective date. | nitted to the City Clerk                         | at least twe    | nty-eight (28) days before the       |  |
| Office Use Only:                                       |  |                 |                                      |  |
| Rate allowed by operating lice                         | ense: Meter Zone                                 | Flat Limou      | sine                                 |  |
| Submission Date:                                       | Last Rate Cha                                    | inge Submitted  | 1:                                   |  |
| Distribution:  City Department of Transport            |  | Licenso         | e#                                   |  |
| ☐ City Weights and Measures☐ Dane County Regional Air  |  |                 |                                      |  |
| ☐ City Police Department                               |  | 405 Pu          | blic Passenger Vehicle/Pedal Cab     |  |
|  |  | 406 Ho          | orse-Drawn Vehicle                   |  |
|  |  | 408 Pe          | dal Cab Service                      |  |
|  |  |                 |                                      |  |