## 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

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1.	Applicant Name Tom H. MELMS Home Phone # 408-244:6012  Home Address 509 WOOD WARD DR MADISON NI 53704
	Home Address 509 WOOD WARD DR MADISON NI 53704
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2.	Company Name BADGIR CAIS CO TNC  Business Address 700 COTTAGIL CAROVE RD MARISON WI 53716
	Business Address 700 COTTAGI COROVE RD MADISON WI 53716
	Business Telephone Number 408-256-5566
3.	Indicate method of operation and type of fare collection:
	Flate Rate Number of Vehicles
	Zone Number of Vehicles 3
	Meter Number of Vehicles
	Airport Shuttle Number of Vehicles
	Total number of vehicles proposed to be operated
121	
4.	Describe detailed color scheme to be used: main body, roof, trim, lettering, etc.
	WHITE BODY ROOF, RAD LETTERING
	· · · · · · · · · · · · · · · · · · ·
_	en de la companya de la laconomica de la companya d
5.	List your schedule of rates to be charged and the method of charging, in detail:
	\$ 4.00 FIRST ZONE, \$ 1.00 FACH ADDITIONAL ZONE, \$1.00 FACH ADDITIONAL PASSENGED, \$ .25/1/0 MILE OUTER ZONE
	1.00 MACH NOVITIONAL PASSINGAL, 5.35 / 10 MILE OUTER STATE
ο.	Name of Insurance Company  TNTEGRITY MUTUTE INS  Business Address  P.O. Parx 539  Business Telephone Number  APPLITTON, WI \$4912-0539
	Business Address / / 1500 3/
	Business Telephone Number BPPLR 100 , 101 37712-0831
,	Contra 97 15 State
/ <b>.</b> .	Name of Insurance Agent COUTINA DAS SERVICE  Business Address 1111 LINDRO DR. SUITE I  Business Telephone Number 1401 MRN, WI 54636
	Business Address JR. JOHN I
	Business Telephone Number
	EIDA I I NAL

	oration? Yes	No				
Name BAD		Address	Idress of corporation:  OO COTTAG  MADISON W		OVK PD	
MON	H. ME LITS	3	17 ADISON W	ARD D	R 704	
	nership? Yes and address of all partners:	No	7225 - 1	36	129	
Name		Address				
	3	¥				,
10. If any vehicles lice of mortgage and fi	ensed are mortgaged, give i ulfillment date:	name and addres	ss of mortgagee, vehicle	e serial num	nber, amount	
Name	Address	V	ehicle Serial #	\$	Fulfillment Date	
MANIZ						
	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		702		7700	24 W 24
Madison pertaining to these and all other ord	ree that he/she has read and the licensing and regulatin linances of the City and law No •	g of taxicabs in vs of the State of	the City of Madison, ar	nd agrees to	abide by	r NA SS
		- I		1712 4	Zer	
Subscribed and sworn this day of			Applicant's Signature	1	And	m
Notary Public My Commission Expi	res 6 3.17-2022	- 1. 1. π	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	7.5	
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					MA	DISON CITY CLERK

## Taxicab Filing Affidavit

State of Wisconsin )
County of Dane )
TOY H. MBLAS, being first duly sworn on oath, deposes and says:
1. That the affiant owns, operates, or manages a taxicab business in the City of Madison,
doing business as BAD GAR CATS CO TWE
2. That as of the date of this Affidavit, (Company Name) BADGKA CAG CO JWC
(Address) 700 Costacas Com Po, Madison, Wisconsin, doing business as
, was the owner of the vehicles listed on Schedule
A shown on the reverse side of this Affidavit and incorporated herein.
3. That the schedule of fares to be charged in the operation of each of the vehicles listed on Schedule A as taxicab is: (check boxes to indicate which taxicab rates are applicable)
The Meter Taxicab Rates authorized pursuant to Section 11.06(9)(a) of the Madison General Ordinances.
The Zone Taxicab Rates authorized pursuant to Section 11.06(9)(b) of the Madison General Ordinances.
The Airport Shuttle Rates authorized pursuant to Section 11.06(9)(c) of the Madison General Ordinances.
The Flat Rate authorized pursuant to Section 11.06(9)(d) of the Madison General Ordinances.
<ul> <li>4. a) That attached to this Affidavit for deposit with the City Clerk is a Policy or Certificate of Liability Insurance specifying insurance coverage of the types and amounts required by Section 11.06(8) of the Madison General Ordinances, and specifically indicating that said insurance coverage is applicable to the vehicle identified on the said Schedule A; and</li> <li>b) That also attached to said Policy or Certificate of Liability Insurance is a Certificate of Compliance from</li> </ul>
the State of Wisconsin Insurance Commissioner showing the insurance company is licensed and authorized to transact automobile insurance business in the State of Wisconsin; and
c) That said insurance policy contains a provision that the same may not be cancelled before the expiration of its term except upon thirty days' written notice to the City of Madison.
<ol> <li>That this Filing Affidavit is made to comply with the provisions of Section 11.06 of the Madison General Ordinances described herein.</li> </ol>
• • • • • • • • • • • • • • • • • • •
Subscribed and sworn before me
this 11th day of Jen 1607, 2019. Signature of the signing Affiliavir differ facts
Notary Public (1, 0, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,
My Commission Expires 3.27.2022

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## Vehicle List Schedule A

Company Name	

Model	Class & Make	s & State ke License	Owner/ Title Holder	Serial/Engine#	Permit #	Type of Service	Office Use Only						
Year							State Reg.	Ins.	Meter	Insp.	Mark.	Color	Permit Issued
												3.70	
										10		1000	
						•			•				
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													0.00

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## City of Madison -- Taxicab Rate Schedule

METER RATES		
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	Additional Charge \$	
Wait Time Seconds	Wait Charge \$	915, P
VAN RATES (LARGE PARTY—6 OR MORE PASS	FNGFRS)	
In Town		3 7 1
"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	Additional Charge \$	
Wait Time Seconds	Wait Charge \$	
ZONE RATES	Ex. 1241 7	7
First Zone Charge \$ 4.00		
Additional Zone(s) Charge \$		
Additional Passenger Charge \$ 1.00 (for	passengers making the same trip as the first passenger)	
Outer Zone DistanceMI	Outer Zone Charge \$25	
Wait Time Seconds	Wait Charge \$, 50/11/1	
FLAT RATES		
"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 \$ per passenger		
, , , , , , , , , , , , , , , , , , , ,		

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\$ 30.00	_ per hour
RATES FOR OTHER SERVIC	ES
Personal Baggage:	First two articles <u>Free</u> Additional articles \$ 1.00 each (except trunks and footlockers)
Groceries Carried to Door:	First two bags Free Additional bags \$ . > .
Trunks and Footlockers: Aids to Handicapped People:	\$ 2.00 each Free  Free  \$ 50.00
AIRPORT FEE	
s 1.00	111-(
	_ per vehicle (may not exceed the fee imposed by Dane County)
Company: B	ADGER CAB GO INC
Proposed Effective Date:	1-1-2-01
Toposed Effective Date.	
Submitted by:	for Hotel
Submitted by:	(Signature)
Submitted by:	TOM H. MELIUS
Submitted by:	
	TOIM # . M. T. L. 14.5  (Type or Print Name)
This schedule must be subn	TOM H. MELIUS
This schedule must be subn	TOIM # . M. T. L. 14.5  (Type or Print Name)
This schedule must be subn proposed effective date.	TOIM # . M. T. L. 14.5  (Type or Print Name)
This schedule must be subn proposed effective date.	(Type or Print Name)  nitted to the City Clerk at least twenty-eight (28) days before
This schedule must be subn proposed effective date.  Office Use Only:	(Type or Print Name)  nitted to the City Clerk at least twenty-eight (28) days before
This schedule must be subm proposed effective date.  Office Use Only:  Rate allowed by operating lice	(Type or Print Name)  nitted to the City Clerk at least twenty-eight (28) days before the consecutive Meter Zone Flat Limousine
This schedule must be submorproposed effective date.  Office Use Only:  Rate allowed by operating lices Submission Date:	(Type or Print Name)  nitted to the City Clerk at least twenty-eight (28) days before the consecutive Meter Zone Flat Limousine
This schedule must be submproposed effective date.  Office Use Only:  Rate allowed by operating lice Submission Date:  Distribution:  Total Department of Transposition Department of Transposition Weights and Measures	(Type or Print Name)  initted to the City Clerk at least twenty-eight (28) days before the conse: Meter Zone Flat Limousine  Last Rate Change Submitted:  contation  st (Meter Cabs only)
This schedule must be submproposed effective date.  Office Use Only:  Rate allowed by operating lice Submission Date:  Distribution:  City Department of Transposicity Weights and Measures City Weights and Measures City Dane County Regional Air	(Type or Print Name)  Initted to the City Clerk at least twenty-eight (28) days before the consecution at the Change Submitted:  License #
This schedule must be submproposed effective date.  Office Use Only:  Rate allowed by operating lice Submission Date:  Distribution:  City Department of Transposicity Weights and Measures City Weights and Measures City Dane County Regional Air	(Type or Print Name)  initted to the City Clerk at least twenty-eight (28) days before the consecutive sense: Meter Zone Flat Limousine  Last Rate Change Submitted:  Dortation as (Meter Cabs only)  port 405 Public Passenger Vehicle/Pedal Cab
This schedule must be submproposed effective date.  Office Use Only:  Rate allowed by operating lice Submission Date:  Distribution:  City Department of Transpublicity Weights and Measures Dane County Regional Air	(Type or Print Name)  Initted to the City Clerk at least twenty-eight (28) days before the consecution at the Change Submitted:  License #
This schedule must be submproposed effective date.  Office Use Only: Rate allowed by operating lice Submission Date: Distribution:  City Department of Transposity Department of Transposity Weights and Measures Distribution: City Weights and Measures Distribution: City Police Department	(Type or Print Name)  initted to the City Clerk at least twenty-eight (28) days before the consecutive sense: Meter Zone Flat Limousine  Last Rate Change Submitted:  Dortation as (Meter Cabs only)  port 405 Public Passenger Vehicle/Pedal Cab

Date: 1/ 2/2019° Time:10:19 AM

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Veh ID	VIN	Make	Year Type	Current Mil/Km/Hrs L	License	ST	Expires
<del>↓ 160</del>	<del>2FAFP71</del> W42X144971	FORD	2002 TAXI	1»	(XX-123	₩	12/17-
161	2FAHP71V49X145676	FORD	2009 TAXI	1-4	H7-UBR	WI	12/16-
162	2FAB7BV6AX125518	FORD	2010 TAXI	218,100 5		WI.	12/17
<del>-163</del>	2FABP7BV7AX124829	FORD	2010 TAXI		809-VHW	· <del>\\i\i\i</del> .	
164	2FAB7BV2AX125516	FORD	2010 TAXI	182,350	67	WI.	12/18
165	2FAB7BV4AX125517	FORD	2010 TAXI	178,050		WI	12/12
166	2FABP7BV8BX123724	FÖRÐ	2011 TAXI		74-TEM	₩ <del>1</del>	<del>12/18</del>
167	2FAB7BVXBX123725	FORD	2011 TAXI	122,500 6		WI.	12/18
168	2FAHP71V39X128965	FORD	2009 TAXI	259,550 9		WI.	10/17
169	2FABP7BV1BX116310	FORD	2011 TAXI	99,200		WI.	10/17
170	2FABP7BV1BX157228	FORD	2011 TAXI	130,000		WI.	12/18
171	2FABP7BVBX123727	FORD	2011 TAXI	144,700		WI.	07/18
172	2FABP7BV1AX105872	FORD	2010 TAXI	243,050 9		WI.	07/17
- <del>173</del>		FORD	- 2009 TAXI	1-8			
174	2FAB7BV9AX125531	FORD	2010 TAXI		CF-8581		
175	2FABP7BV58X123728	FORD	2011 TAXI	158,500 8		Wi	12/18
176	2FABP7BV4AX123332	FORD	2010 TAXI	193,100 2		WI.	02/18
<del>-177</del>	<del>2FAHP71W26X156843</del>	FORD	2006 TAXI	,		-WI	12/12
178	2FAHP71W15X176306	FORD	2005 TAXI		418-UBR	₩i.	-12/12
179	2FAB7BV2BX116302	FORD	2011 TAXI	156,900 8		WI	03/19
180	2FAHP71W86X157365	FORD	2006 TAXI			-₩:	07/12
181	2FAHP71V28X130205	FORD	2008 TAXI		280-ZZA		12/12
182	2FAB7BV7AX119100	FORD	2010 TAXI	134,200 2		WI.	04/19
183	2FABP7BVXBX112501	FORD	2011 TAXI	164,700 2		WI.	12/18
184	2FAFP71VX8X125924	FORD	2008 TAXI		517-UBR -	₩	<del>12/13</del>
185	2FAB7BV7AX124832	FORD	2010 TAXI	199,600 5		WI.	12/17
<del>186</del>	2FAHP71V58X130201	FORD	2008-TAXI				<del>12/12</del> -
187	2FAHP71V58X106545	F0RD	2008 TAXI		03-USA	<del>-₩1.</del>	<del>-12/13 -</del>
188	2FAHP71WX7X131688	FORD	2007 TAXI		95-UEA	- <del>WI</del> -	12/12
189	2FAHP71VX9X145634	FORD	2009 TAXI	277,550 9		WI	12/16
.190	2FABP7BV3BX114252	FORD	2011 TAXI	148,700 3		WI.	01/18
191	2FAFP71W56X166113	FORD	2006 TAXI		48-VYE	<del>-₩.</del>	12/12
192	2FAFBP7BV2AX135012	FORD	2010 TAXI	225,850 5		WI.	12/16
193	2FABO7BV6BX123723	FORD	2011 TAXI	164,100 2		WI.	12/18
194	2FAFBP7BV2AX135009	FORD	2010 TAXI	235,500 4		WI	01/17
<del>195</del>	2FAFP71WX6X109003	FORD	2006-TAXI			-W <del>l</del>	12/12-
196	2FABP7BV8AX124838	FORD	2010 TAXI	218,250 5		WI.	12/17
197	2FAB7BV9BX116300	FORD	2011 TAXI	126,100 2		WI.	05/19
<del>198</del>	2FAFP71VX8X164867	FORD	2008 TAXI		96 <del>-ZZA</del>	<del>₩</del> .	12/12
199	2FAB7BV0AZ119102	FORD	2010 TAXI	151,350 7		WI.	12/18
200	2FAHP71V89X145681	FORD	2009 TAXI			- <del>\\ </del>	<del>12/18 -</del>
<del>-′ 201</del>	2FAFP71V68X176580	FORD	2008 TAXI		74-TEM	-WI	<del>-12/12</del>
202	2FAHP71VX8X153070	FORD	2008-TAXI	1-5	543-ZZA	₩	12/13

