`   APPLICATION
                             Taxicab Company Permit
                  (Section 25.09 Brown County Code of Ordinances)

This Application for a Taxicab Company Permit is submitted by the Taxicab Company as required by Section 25.09, Brown County Code of Ordinances. The information provided is true and complete as of the date of this Application.

By submitting this Application, Taxicab Company represents that for each of its Taxicab Drivers, it has complied with the requirements of subsection 25.09(3), Brown County Code of Ordinances and that no Taxicab Driver is disqualified under subsection 25.09(4), Brown County Code of Ordinances.

TAXICAB COMPANY (please print)

(If a corporation or limited liability company the name must be the same as on file with the Wisconsin Department of Financial Institutions)

COMPLETE LEGAL NAME: _____

ADDRESS:_____

CONTACT PERSON:_____

CONTACT PERSON TELEPHONE NO._____

DRIVER SUPERVISOR: NAME:_____
                       TELEPHONE NO._____

Name of municipality where Taxicab Company and Taxicab are licensed (see subsection 25.09(5)(f), Brown County Code of Ordinances).

                            NAME:_____
                            TELEPHONE NO._____

Unless waived by the Airport Director, the attached Vehicle List must be completed and submitted with this Application.

        _____ Required

        _____ Waived

TAXICAB COMPANY:

By:_____
Name:_____
Title:_____
Date:_____

VEHICLE LIST

NAME OF COMPANY:_____

YEAR	MAKE	MODEL	PLATE NO.	VIN	DECAL NO.	MUNICIPAL LICENSE OR PERMIT NO.