

Receipt No. 369385

Amount 100 -

License No. _____

Fee: \$100.00

Account No. 101.030.649

Application for Motor Vehicle Towing License – City of Racine, WI

Date 6/25/10

Expires June 30, 2011

I hereby certify that I am owner, partner, or corporate officer of business applying for motor vehicle towing license, and further certify that I have met all licensing requirements as outlined in Sec. 22-831 through 22-840 of the Racine Municipal Code, and that inspection certificates of motor vehicles being used are attached.

Name of Towing Company Floyd and Sons, Inc

Business Address 1525 Durand Avenue Racine, WI Zip Code 53403

Individual (Name of Applicant) _____

Home Address _____ Phone No. _____

Partnership (Name, addresses, and phone numbers of partners:

Name	Address	Phone No.

Corporation Name Floyd and Sons, Inc.

Names, addresses, and phone numbers of officers:

Title	Name and Address	Phone No.
President	Floyd Leonard, Jr. 2634 SE Frontage Rd.	262-884-8191
Vice-President	Rick Leonard 3611 Country Lane	262-554-7150
Secretary	Kathleen Leonard 3611 Country Lane	262-554-7150
Treasurer	same	

Name, address, and phone number of person in charge:

Floyd Leonard or Rick Leonard Phone No. seeabove

* Insurance Underwriter: Regent Insurance Company

Rick Leonard
Signature of Applicant

* Attach insurance certificate

Hold Harmless Agreement

Whereas, the undersigned towing company has applied to the City of Racine for a Motor Vehicle Towing License; and

Whereas, as a condition of issuance of said license, the company must comply with Section 22-835(3) of the Municipal Code of the City of Racine to hold the City harmless from certain liability.

Now, therefore, in consideration of the issuance of said license, the undersigned towing company hereby agrees to indemnify and hold harmless the City of Racine, its departments, officers, agents, and employees for any losses, claims, or damages to vehicles and contents of vehicles resulting from the negligence of the towing company, its officers, agents or employees, in its operation under Sec. 22-831 through 22-840 of the Municipal Code, including but not limited to its towing and storage of vehicles.

It is the express intention of the undersigned that this Agreement be liberally construed in favor of the City of Racine. This Agreement shall remain in effect for the term during which the company holds said license and shall continue in force thereafter relative to any incident for which liability is claimed to be accrued during such period.

Dated this 25TH day of June, 2010.

Towing company name Floyd and Sons Inc

By: [Signature]

By: [Signature]

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID AC
FLOYD-2

DATE (MM/DD/YYYY)
03/26/10

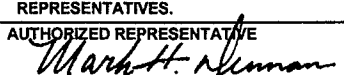
PRODUCER Robertson Ryan & Assoc., Inc. Two Plaza East, Suite 650 330 East Kilbourn Avenue Milwaukee WI 53202 Phone: 414-271-3575 Fax: 414-271-0196	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED Floyd & Sons Inc Rick Leonard 1525 Durand Avenue Racine WI 53403	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:80%;">INSURERS AFFORDING COVERAGE</th> <th style="width:20%;">NAIC #</th> </tr> <tr> <td>INSURER A: Regent Insurance Company</td> <td></td> </tr> <tr> <td>INSURER B: GENERAL CASUALTY COS OF WIS</td> <td>24414</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: Regent Insurance Company		INSURER B: GENERAL CASUALTY COS OF WIS	24414	INSURER C:		INSURER D:		INSURER E:	
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INSURER C:													
INSURER D:													
INSURER E:													

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY	CCI0192758	04/01/10	04/01/11	EACH OCCURRENCE \$ 1000000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5000
		<input checked="" type="checkbox"/> Blanket AI per written contract				PERSONAL & ADV INJURY \$ 1000000
GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2000000
<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 2000000
						Emp Ben. 1000000
A		AUTOMOBILE LIABILITY	CBA0192758	04/01/10	04/01/11	COMBINED SINGLE LIMIT (Ea accident) \$ 1000000
		<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
GARAGE LIABILITY						AUTO ONLY - EA ACCIDENT \$
<input type="checkbox"/> ANY AUTO						OTHER THAN EA ACC \$
						AUTO ONLY: AGG \$
B		EXCESS/UMBRELLA LIABILITY	CCI0192758	04/01/10	04/01/11	EACH OCCURRENCE \$ 2000000
		<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 2000000
		<input type="checkbox"/> DEDUCTIBLE				\$
		<input checked="" type="checkbox"/> RETENTION \$10000				\$
						\$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	CWC0192758	04/01/10	04/01/11	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$ 100000
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$ 100000
		OTHER				E.L. DISEASE - POLICY LIMIT \$ 500000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 The City of Racine is added as additional insured for any work performed by the Named Insured.

CERTIFICATE HOLDER RACIN-1 City of Racine Attn: Lynn 730 Washington Ave Rm #102 Racine WI 53403	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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CERTIFICATE OF VEHICLE INSPECTION

IND-4060 5R3 (formerly DSP-4060)

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 1995 IHC #4

State of Wisconsin / Department of Transportation

Writer's Name

FLOYD AND SONS INC

Address - Street or RFD

1525 DURAND AVE

City State Zip Code

RACINE WI 53403

CHECK ONE:

V.I.N. **1HTSCABM6SH656362**

Engine No.

No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:

- A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
- A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
- A motor vehicle that was previously junked; OR,
- Other vehicle (reason for inspection **SAFETY INSPECTION FOR CITY TOWING LIST**)

See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unshown as an inspection fail below.

Inspection Fail Pass

X *[Signature]*
(Signature of Inspecting Authority - Title/Badge No.)

6-8-10
(Date)

VEHICLE INSPECTION CHECK LIST

Headlamps		Windshield Wiper		Seals		Odometer Reading		Rear Suspension		C		
Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK	
Working	<input checked="" type="checkbox"/>	Equipped	<input checked="" type="checkbox"/>	Mounting	<input checked="" type="checkbox"/>			Shocks			NA	
Adequate or Legal	<input checked="" type="checkbox"/>	Condition	<input checked="" type="checkbox"/>	Left Rear Tire				Springs			X	
Beam Indicator	<input checked="" type="checkbox"/>	Contact	<input checked="" type="checkbox"/>	Cuts or Snags				Modified				
Dimmer Switch	<input checked="" type="checkbox"/>			Tire Wear				Trunk/Hood Latch				
		Windshield		Regrooved/Recut				Latch			NA	
		Type Glass	<input checked="" type="checkbox"/>	Studded				Rear Window				
Front Parking Lamps	<input checked="" type="checkbox"/>	Cloudiness	<input checked="" type="checkbox"/>	Wheel & Rim				Type Glass			<input checked="" type="checkbox"/>	
Working	<input checked="" type="checkbox"/>	Sharp Edges & Scratches	<input checked="" type="checkbox"/>	50%				Nontransparent Materials			<input checked="" type="checkbox"/>	
Front Directional Lamps	<input checked="" type="checkbox"/>	Nontransparent Materials	<input checked="" type="checkbox"/>	Rear Bumper & Fenders				Cloudiness			<input checked="" type="checkbox"/>	
Working	<input checked="" type="checkbox"/>	Cracks & Damage	<input checked="" type="checkbox"/>	Equipped				Right Rear Tire				
Signal Mechanism	<input checked="" type="checkbox"/>	Mirrors	<input checked="" type="checkbox"/>	Mounting				Cuts or Snags			<input checked="" type="checkbox"/>	
Signal Indicator	<input checked="" type="checkbox"/>	Mounting	<input checked="" type="checkbox"/>	Projecting Parts				Tire Wear			<input checked="" type="checkbox"/>	
Hood/Trunk Latch	<input checked="" type="checkbox"/>	Condition	<input checked="" type="checkbox"/>	Tail Lamps				Regrooved/Recut			<input checked="" type="checkbox"/>	
Latch	<input checked="" type="checkbox"/>	Clear View	<input checked="" type="checkbox"/>	Working				Studded			NA	
Front Bumper & Fenders	<input checked="" type="checkbox"/>	Outside Mirror If Rear Window Is Bad	<input checked="" type="checkbox"/>	Adequate or Legal				Wheel & Rim			<input checked="" type="checkbox"/>	
Equipped	<input checked="" type="checkbox"/>	Left Windows	<input checked="" type="checkbox"/>	Wiring or Connections				50%				
Mounting	<input checked="" type="checkbox"/>	Type Glass	<input checked="" type="checkbox"/>					Right Windows				
Projecting Parts	<input checked="" type="checkbox"/>	Operation	<input checked="" type="checkbox"/>	Brake Lamps				Type Glass			<input checked="" type="checkbox"/>	
Front Suspension	<input checked="" type="checkbox"/>	Nontransparent Materials	<input checked="" type="checkbox"/>	Working				Nontransparent Materials			<input checked="" type="checkbox"/>	
Shocks	<input checked="" type="checkbox"/>	Cloudiness	<input checked="" type="checkbox"/>	Adequate or Legal				Cloudiness			<input checked="" type="checkbox"/>	
		Left Door Latches	<input checked="" type="checkbox"/>	Working				Right Door Latches			<input checked="" type="checkbox"/>	
Left Front Tire	<input checked="" type="checkbox"/>	Hold	<input checked="" type="checkbox"/>	Adequate or Legal				Hold			<input checked="" type="checkbox"/>	
Cuts or Snags	<input checked="" type="checkbox"/>	Speed Indicator	<input checked="" type="checkbox"/>	License Plate Lamp				Right Front Tire				
Tire Wear	<input checked="" type="checkbox"/>	Equipped	<input checked="" type="checkbox"/>	Working				Cuts or Snags			<input checked="" type="checkbox"/>	
Regrooved/Recut	<input checked="" type="checkbox"/>	Brakes	<input checked="" type="checkbox"/>	Rear Directional Lamps				Tire Wear			<input checked="" type="checkbox"/>	
Studded	<input checked="" type="checkbox"/>	Pedal Reserve	<input checked="" type="checkbox"/>	Working				Regrooved/Recut			NA	
Wheel & Rim	<input checked="" type="checkbox"/>	Parking Brake	<input checked="" type="checkbox"/>	Adequate or Legal				Studded			NA	
50%				Cancel				Wheel & Rim			<input checked="" type="checkbox"/>	
Steering	<input checked="" type="checkbox"/>	Seal Bells	<input checked="" type="checkbox"/>	Working				50%				
Loose or Binding	<input checked="" type="checkbox"/>	Equipped	<input checked="" type="checkbox"/>	Exhaust & Fuel				Miscellaneous				
Lash	<input checked="" type="checkbox"/>	Legal	<input checked="" type="checkbox"/>	Adequate Exhaust				This unit is a low pro IHC with a medium duty hydraulic lift and a 20,000 lb. hydraulic boom.				
Bells	<input checked="" type="checkbox"/>	Webbing	<input checked="" type="checkbox"/>	Tallpipe								
		Legal Muffler	<input checked="" type="checkbox"/>	Legal Muffler								
Horn	<input checked="" type="checkbox"/>	Webbing	<input checked="" type="checkbox"/>	Mounted thru Pass. Compart.								
Equipped	<input checked="" type="checkbox"/>	Webbing	<input checked="" type="checkbox"/>									
Audible	<input checked="" type="checkbox"/>	Webbing	<input checked="" type="checkbox"/>									
Horn Button or Ring	<input checked="" type="checkbox"/>	Webbing	<input checked="" type="checkbox"/>									

I, **FLOYD AND SONS INC** am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

X *[Signature]*
(Signature of Owner)

6-8-10 X
(Date)

(Witness - Must be Law Officer)

(Date)

Owner's Name: FLOYD AND SONS INC
 Address - Street or RFD: 1525 DURAND AVE
 City: MADISON State: WI Zip Code: 53104

CHECK ONE:
 V.I.N. 1HTSCABM2XH687714
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
 A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
 A motor vehicle that was previously junked; OR,
 Other vehicle (reason for inspection SAFETY INSPECTION FOR CITY TOW LIST)

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unshown as an inspection fail below.
 Inspection Fail Pass X [Signature] (Signature of Inspecting Authority - Title/Badge No.) 6-8-10 (Date)

VEHICLE INSPECTION CHECK LIST										Odometer Reading _____	
Item	Not OK	OK	Item	Not OK	OK	Item	Not OK	OK	Item	Not OK	OK
Headlamps		<input checked="" type="checkbox"/>	Windshield Wiper		<input checked="" type="checkbox"/>	Seats		<input checked="" type="checkbox"/>	Rear Suspension		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Shocks		<input checked="" type="checkbox"/>
Adequate or Legal		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Left Rear Tire		<input checked="" type="checkbox"/>	Springs		<input checked="" type="checkbox"/>
Beam Indicator		<input checked="" type="checkbox"/>	Contact		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>	Modified		<input checked="" type="checkbox"/>
Dimmer Switch		<input checked="" type="checkbox"/>				Tire Wear		<input checked="" type="checkbox"/>	Trunk/Hood Latch		<input checked="" type="checkbox"/>
						Regrooved/Recut		<input checked="" type="checkbox"/>	Latch		<input checked="" type="checkbox"/>
			Windshield		<input checked="" type="checkbox"/>	Sludded		<input checked="" type="checkbox"/>	Rear Window		<input checked="" type="checkbox"/>
Front Parking Lamps		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>	<u>80%</u>		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
Front Directional Lamps		<input checked="" type="checkbox"/>	Sharp Edges & Scratches		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Rear Bumper & Fenders		<input checked="" type="checkbox"/>	Right Rear Tire		<input checked="" type="checkbox"/>
Signal Mechanism		<input checked="" type="checkbox"/>	Cracks & Damage		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Signal Indicator		<input checked="" type="checkbox"/>	Mirrors		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Tire Wear		<input checked="" type="checkbox"/>
Hood/Trunk Latch		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Protecting Parts		<input checked="" type="checkbox"/>	Regrooved/Recut		<input checked="" type="checkbox"/>
Latch		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Tail Lamps		<input checked="" type="checkbox"/>	Sludded		<input checked="" type="checkbox"/>
Front Bumper & Fenders		<input checked="" type="checkbox"/>	Clear View		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Outside Mirror		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	<u>80%</u>		<input checked="" type="checkbox"/>
Mounting		<input checked="" type="checkbox"/>	Rear Window L. D. Ad.		<input checked="" type="checkbox"/>	Wiring or Connections		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Projecting Parts		<input checked="" type="checkbox"/>	Left Windows		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	Right Windows		<input checked="" type="checkbox"/>
Front Suspension		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
Shocks		<input checked="" type="checkbox"/>	Operation		<input checked="" type="checkbox"/>	Brake Lamps		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
			Nontransparent Materials		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
			Cloudiness		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Right Door Latches		<input checked="" type="checkbox"/>
Left Front Tire		<input checked="" type="checkbox"/>	Left Door Latches		<input checked="" type="checkbox"/>	License Plate Lamp		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>
Cuts or Snags		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Right Front Tire		<input checked="" type="checkbox"/>
Tire Wear		<input checked="" type="checkbox"/>	Speed Indicator		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Regrooved/Recut		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Tire Wear		<input checked="" type="checkbox"/>
Sludded		<input checked="" type="checkbox"/>				Rear Directional Lamps		<input checked="" type="checkbox"/>	Regrooved/Recut		<input checked="" type="checkbox"/>
Wheel & Rim		<input checked="" type="checkbox"/>	Brakes		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Sludded		<input checked="" type="checkbox"/>
<u>80%</u>		<input checked="" type="checkbox"/>	Pedal Reserve		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Steering		<input checked="" type="checkbox"/>	Parking Brake		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	<u>80%</u>		<input checked="" type="checkbox"/>
Loose or Binding		<input checked="" type="checkbox"/>				Cancel		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Lash		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>	Miscellaneous		<input checked="" type="checkbox"/>
Belts		<input checked="" type="checkbox"/>	Seal Belts		<input checked="" type="checkbox"/>	Exhaust & Fuel		<input checked="" type="checkbox"/>	This unit is also a		<input checked="" type="checkbox"/>
			Equipped		<input checked="" type="checkbox"/>	Adequate Exhaust		<input checked="" type="checkbox"/>	low pro IHC with a		<input checked="" type="checkbox"/>
			Legal		<input checked="" type="checkbox"/>	Tailpipe		<input checked="" type="checkbox"/>	medium duty hydraulic		<input checked="" type="checkbox"/>
Horn		<input checked="" type="checkbox"/>	Webbing		<input checked="" type="checkbox"/>	Legal Muffler		<input checked="" type="checkbox"/>	lift and a 20,000 lb,		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Anchor		<input checked="" type="checkbox"/>	Modded Thru		<input checked="" type="checkbox"/>	hydraulic boom.		<input checked="" type="checkbox"/>
Audible		<input checked="" type="checkbox"/>	Buckles		<input checked="" type="checkbox"/>	Pass. Comp. 1.		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Horn Button or Ring		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>

I, FLOYD AND SONS INC am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

X [Signature] (Signature of Owner) 6-8-10 (Date) X _____ (Witness - Must be Law Officer) _____ (Date)

Address - Street or RFD: 1525 MIRAND AVE
 City: RACINE State: WI Zip Code: 53403

Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
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See reverse for remarks and other rejection reason(s).
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 Inspection Fail Pass X Rob Lenz (Signature of Inspecting Authority—Title/Badge No.) 6-8-10 (Date)

VEHICLE INSPECTION CHECK LIST										Odometer Reading					
Headlamps		Not OK	OK	Windshield Wiper		Not OK	OK	Seats		Not OK	OK	Rear Suspension		Not OK	C
Working			X	Equipped			X	Mounting			X	Shocks			NA
Adequate or Legal			X	Condition			X	Left Rear Tire			X	Springs			X
Beam Indicator			X	Contact			X	Cuts or Snags			X	Modified			
Dimmer Switch			X	Windshield				Tire Wear			X	Trunk/Hood Latch			
Front Parking Lamps			X	Type Glass			X	Regrooved/Recut			X	Latch			NA
Working			X	Cloudiness			X	Studded			NA	Rear Window			
Front Directional Lamps			X	Sharp Edges & Scratches			X	Wheel & Rim			X	Type Glass			X
Working			X	Nontransparent Materials			X	40%				Nontransparent Materials			X
Signal Mechanism			X	Cracks & Damage			X	Rear Bumper & Fenders				Cloudiness			X
Signal Indicator			X	Mirrors			X	Equipped			X	Right Rear Tire			
Hood/Trunk Latch			X	Mounting				Mounting			X	Cuts or Snags			X
Latch			X	Condition				Projecting Parts			X	Tire Wear			X
Front Bumper & Fenders			X	Clear View				Projecting Parts			X	Regrooved/Recut			X
Equipped			X	Outside Mirror II			X	Tail Lamps				Studded			NA
Mounting			X	Real Window II, Dad			X	Working			X	Wheel & Rim			X
Projecting Parts			X	Left Windows			X	Adequate or Legal			X	40%			
Front Suspension			X	Type Glass			X	Wiring or Connections			X	Right Windows			
Shocks			X	Operation			X					Type Glass			X
Left Front Tire			X	Nontransparent Materials			X	Brake Lamps			X	Nontransparent Materials			X
Cuts or Snags			X	Cloudiness			X	Working			X	Cloudiness			X
Tire Wear			X	Left Door Latches			X	Adequate or Legal			X	Right Door Latches			X
Regrooved/Recut			NG	Hold			X	License Plate Lamp			X	Hold			X
Studded			NG	Speed Indicator			X	Working			X	Right Front Tire			
Wheel & Rim			X	Equipped			X	Rear Directional Lamps			X	Cuts or Snags			X
50%				Brakes			X	Working			X	Tire Wear			X
Steering			X	Pedal Reserve			X	Adequate or Legal			X	Regrooved/Recut			NA
Loose or Binding			X	Parking Brake			X	Back Up Lamp			X	Studded			NA
Lash			X	Seal Belts			X	Working			X	Wheel & Rim			X
Bells			X	Equipped			X	Cancel			X	50%			
Horn			X	Legal			X	Exhaust & Fuel			X	Miscellaneous			
Equipped			X	Webbing			X	Adequate Exhaust			X	This vehicle is a			
Audible			X	Anchors			X	Tailpipe			X	19.5 ft hydraulic			
Horn Button or Ring			X	Duckies			X	Legal Muffler			X	falshed two car			
								Machine thru				haul with a wheel			
								Pass. Comp. Int.				lift.			

I, FLOYD AND SONS INC am the owner of the vehicle and I understand that I am responsible for maintain the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.
 X Floyd Leonard Jr. (Signature of Owner) 6-8-10 (Date) X _____ (Witness—Must be Law Officer) _____ (Date)

Owner's Name: **FLOYD AND SONS INC.**
 Address - Street or RFD: **1525 DURAND AVE.**
 City: **RACINE** State: **WI** Zip Code: **53403**

CHECK ONE:
 V.I.N. **1HTMMAAM12H521913**
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
 A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
 A motor vehicle that was previously junked; OR,
 Other vehicle (reason for inspection **CITY OF RACINE TOWING LIST (SAFETY INSPECTION)**)

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unshown as an inspection fail below.

Inspection Fail Pass X *[Signature]* (Signature of Inspecting Authority - Title/Badge No.) **6-11-10** (Date)

VEHICLE INSPECTION CHECK LIST				Odometer Reading							
Item	Not OK	OK	Item	Not OK	OK	Item	Not OK	OK	Item	Not OK	OK
Headlamps			Windshield Wiper			Seals			Rear Suspension		
Working		X	Equipped		X	Mounting		X	Shocks		NA
Adequate or Legal		X	Condition		X	Left Rear Tire			Springs		X
Beam Indicator		X	Contact		X	Cuts or Snags		X	Modified		
Dimmer Switch		X				Tire Wear		X	Trunk/Hood Latch		
			Windshield			Regrooved/Recut		X	Latch		NA
			Type Glass		X	Studded		NA	Rear Window		
Front Parking Lamps		X	Cloudiness		X	Wheel & Rim		X	Type Glass		X
Working		X	Sharp Edges & Scratches		X	4070			Nontransparent Materials		X
Front Directional Lamps		X	Nontransparent Materials		X	Rear Bumper & Fenders			Cloudiness		X
Working		X	Cracks & Damage		X	Equipped		X	Right Rear Tire		X
Signal Mechanism		X	Mirrors		X	Mounting		X	Cuts or Snags		X
Signal Indicator		X	Mounting			Projecting Parts		X	Tire Wear		X
Hood/Trunk Latch		X	Condition			Tail Lamps		X	Regrooved/Recut		X
Latch		X	Clear View		X	Working		X	Studded		X
Front Bumper & Fenders		X	Outside Mirror If Rear Window Is Bad		X	Wheel & Rim		X	Wheel & Rim		X
Equipped		X	Left Windows		X	Adequate or Legal		X	4070		
Mounting		X	Type Glass			Wiring or Connections		X	Right Windows		
Projecting Parts		X	Operation		X				Type Glass		X
Front Suspension		X	Nontransparent Materials		X	Brake Lamps			Nontransparent Materials		X
Shocks		X	Cloudiness		X	Working		X	Cloudiness		X
			Left Door Latches		X	Adequate or Legal		X	Right Door Latches		X
Left Front Tire		X	Hold		X	License Plate Lamp		X	Hold		X
Cuts or Snags		X	Speed Indicator		X	Working		X	Right Front Tire		X
Tire Wear		X	Equipped		X	Rear Directional Lamps		X	Cuts or Snags		X
Regrooved/Recut		NA	Brakes		X	Working		X	Tire Wear		X
Studded		NA	Pedal Reserve		X	Adequate or Legal		X	Regrooved/Recut		X
Wheel & Rim		X	Parking Brake		X	Back Up Lamp		X	Studded		X
4070						Working		X	Wheel & Rim		X
Steering		X				Cancel		X	4070		
Loose or Binding		X							Miscellaneous		
Lash		X	Seal Bells		X	Exhaust & Fuel			This vehicle		
Bells		X	Equipped		X	Adequate Exhaust		X	is a 21 ft		
			Legal		X	Tailpipe		X	hydraulic flat		
Horn		X	Webbing		X	Legal Muffler		X	bed two car		
Equipped		X	Anchors		X	Modified thru Pass. Comp.		NA	haul with a		
Audible		X	Buckles		X				wheel lift.		
Horn Button or Ring		X									

I, Floyd Leonard G. am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

X Floyd Leonard G. (Signature of Owner) **6-11-10** (Date) X _____ (Witness - Must be Law Officer) _____ (Date)

CERTIFICATE OF VEHICLE INSPECTION

MVD-4060 583 (formerly DSP-4060)

State of Wisconsin / Department of Transportation
Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 2006 Sterling Flatbed

Owner's Name: Floyd & Sons, Inc.
Address - Street or RFD: 1525 Durand Avenue
City: Racine State: WI Zip Code: 53403

CHECK ONE:
[X] V.I.N. 2FZACFCS26AW73125
[] Engine No.
[] No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
[] A homemade motor vehicle...
[] A reconstructed motor vehicle...
[] A motor vehicle that was previously junked...
[X] Other vehicle (reason for inspection SAFETY INSPECTION FOR CITY TOWING LIST)
[] See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.
Inspection [] Fail [X] Pass X [Signature] 6-11-90 (Date)

VEHICLE INSPECTION CHECK LIST table with columns for various vehicle components (Headlamps, Windshield Wiper, Seats, etc.) and checkboxes for Not OK, OK, or O.

I, Floyd & Sons, Inc. am the owner of the vehicle and I understand that I am responsible for maintain the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardi the safety of motorists or pedestrians.
X [Signature] 6-11-10 X (Witness-Must be Law Officer) (Date)

CERTIFICATE OF VEHICLE INSPECTION

MVD-4060 583 (formerly DSP-4060)

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 2006 IHC Flatbed #12

State of Wisconsin / Department of Transportation

Owner's Name
Floyd & Sons, Inc.
 Address - Street or RFD
1525 Durand Avenue
 City
Racine State
WI Zip Code
53403

CHECK ONE:
 V.I.N. **1HTMMAAL86H230452**
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:

- A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
- A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
- A motor vehicle that was previously junked; OR,
- Other vehicle (reason for inspection) **SAFETY INSPECTION FOR CITY TOWING LIST**

See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass

X *[Signature]*
 (Signature of Inspecting Authority—Title/Badge No.)

6-11-10
 (Date)

VEHICLE INSPECTION CHECK LIST

VEHICLE INSPECTION CHECK LIST						Odometer Reading _____					
Headlamps	Not OK	OK	Windshield Wiper	Not OK	OK	Seats	Not OK	OK	Rear Suspension	Not OK	OK
Working		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Shocks		<input checked="" type="checkbox"/>
Adequate or Legal		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Left Rear Tire		<input checked="" type="checkbox"/>	Springs AIR RIDE		<input checked="" type="checkbox"/>
Beam Indicator		<input checked="" type="checkbox"/>	Contact		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>	Modified		<input type="checkbox"/>
Dimmer Switch		<input checked="" type="checkbox"/>				Tire Wear		<input checked="" type="checkbox"/>	Trunk/Hood Latch		<input type="checkbox"/>
						Regrooved/Recut		<input type="checkbox"/>	Latch		<input type="checkbox"/>
			Windshield			Studded		<input type="checkbox"/>	Rear Window		<input type="checkbox"/>
Front Parking Lamps		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>	35%		<input type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
Front Directional Lamps		<input checked="" type="checkbox"/>	Sharp Edges & Scratches		<input checked="" type="checkbox"/>			<input type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Rear Bumper & Fenders		<input type="checkbox"/>	Right Rear Tire		<input type="checkbox"/>
Signal Mechanism		<input checked="" type="checkbox"/>	Cracks & Damage		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Signal Indicator		<input checked="" type="checkbox"/>	Mirrors		<input type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Tire Wear		<input checked="" type="checkbox"/>
Hood/Trunk Latch		<input checked="" type="checkbox"/>	Mounting		<input type="checkbox"/>	Projecting Parts		<input checked="" type="checkbox"/>	Regrooved/Recut		<input type="checkbox"/>
Latch		<input checked="" type="checkbox"/>	Condition		<input type="checkbox"/>	Tail Lamps		<input type="checkbox"/>	Studded		<input type="checkbox"/>
Front Bumper & Fenders		<input checked="" type="checkbox"/>	Clear View		<input type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Outside Mirror If Real Window Is Bad		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	35%		<input type="checkbox"/>
Mounting		<input checked="" type="checkbox"/>	Left Windows		<input checked="" type="checkbox"/>	Wiring or Connections		<input checked="" type="checkbox"/>			<input type="checkbox"/>
Projecting Parts		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>			<input type="checkbox"/>	Right Windows		<input type="checkbox"/>
Front Suspension		<input checked="" type="checkbox"/>	Operation		<input checked="" type="checkbox"/>			<input type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
Shocks		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Brake Lamps		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
			Cloudiness		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
Left Front Tire		<input checked="" type="checkbox"/>	Left Door Latches		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Right Door Latches		<input checked="" type="checkbox"/>
Cuts or Snags		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>	License Plate Lamp		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>
Tire Wear		<input checked="" type="checkbox"/>	Speed Indicator		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Right Front Tire		<input checked="" type="checkbox"/>
Regrooved/Recut		<input type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Rear Directional Lamps		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Studded		<input type="checkbox"/>	Brakes		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Tire Wear		<input checked="" type="checkbox"/>
Wheel & Rim		<input checked="" type="checkbox"/>	Pedal Reserve		<input checked="" type="checkbox"/>	Adequate or Legal		<input type="checkbox"/>	Regrooved/Recut		<input type="checkbox"/>
85%			Parking Brake		<input checked="" type="checkbox"/>	Back Up Lamp		<input type="checkbox"/>	Studded		<input type="checkbox"/>
Steering		<input checked="" type="checkbox"/>				Working		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Loose or Binding		<input checked="" type="checkbox"/>	AIR BRAKES			Cancel		<input checked="" type="checkbox"/>	85%		<input type="checkbox"/>
Lash		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>			<input type="checkbox"/>
Belts		<input checked="" type="checkbox"/>	Seal Belts		<input checked="" type="checkbox"/>	Exhaust & Fuel		<input checked="" type="checkbox"/>	Miscellaneous		<input type="checkbox"/>
			Equipped		<input checked="" type="checkbox"/>	Adequate Exhaust		<input checked="" type="checkbox"/>	This vehicle is a		<input type="checkbox"/>
			Legal		<input checked="" type="checkbox"/>	Tallpipe		<input checked="" type="checkbox"/>	21 ft., 102 in wide		<input type="checkbox"/>
Horn		<input checked="" type="checkbox"/>	Webbing		<input checked="" type="checkbox"/>	Legal Muffler		<input checked="" type="checkbox"/>	hydraulic flatbed		<input type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Anchor		<input checked="" type="checkbox"/>	Modified thru Pass. Comp. Act.		<input checked="" type="checkbox"/>	two car hauler with		<input type="checkbox"/>
Audible		<input checked="" type="checkbox"/>	Buckles		<input checked="" type="checkbox"/>			<input type="checkbox"/>	a wheel lift and		<input type="checkbox"/>
Horn Button or Ring		<input checked="" type="checkbox"/>						<input type="checkbox"/>	SP 8000 Side-puller.		<input type="checkbox"/>

I, **Floyd & Sons, Inc.** am the owner of the vehicle and I understand that I am responsible for maintain the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardi the safety of motorists or pedestrians.

X *[Signature]*
 (Signature of Owner)

6-11-10 X
 (Date)

(Witness—Must be Law Officer)

(Date)

CERTIFICATE OF VEHICLE INSPECTION

MVD-4060 SR3 (formerly DSP-4060)

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File **2002 Freightliner #14F**

State of Wisconsin / Department of Transportation

Owner's Name

Floyd & Sons Inc.

Address - Street or RFD

1525 Durand Ave.

City

Racine

State

Wi.

Zip Code

53403

CHECK ONE:

V.I.N. **1FV7F0Y97YPG93045**

Engine No. _____

No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:

- A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
- A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
- A motor vehicle that was previously junked; OR,
- Other vehicle (reason for inspection **SAFETY INSPECTION FOR CITY TOWING LIST**)

See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass

Floyd Leonard G.
(Signature of Inspecting Authority—Title/Badge No.)

6-15-10
(Date)

VEHICLE INSPECTION CHECK LIST

Odometer Reading _____

Headlamps	Not OK	OK	Windshield Wiper	Not OK	OK	Seats	Not OK	OK	Rear Suspension	Not OK	C
Working		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Shocks		<input checked="" type="checkbox"/>
Adequate or Legal		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Left Rear Tire		<input checked="" type="checkbox"/>	Springs AIR R10E		<input checked="" type="checkbox"/>
Beam Indicator		<input checked="" type="checkbox"/>	Contact		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>	Modified		<input checked="" type="checkbox"/>
Dimmer Switch		<input checked="" type="checkbox"/>				Tire Wear		<input checked="" type="checkbox"/>	Trunk/Hood Latch		<input checked="" type="checkbox"/>
			Windshield			Regrooved/Recut		<input checked="" type="checkbox"/>	Latch		<input checked="" type="checkbox"/>
			Type Glass		<input checked="" type="checkbox"/>	Sludded		<input checked="" type="checkbox"/>	Rear Window		<input checked="" type="checkbox"/>
Front Parking Lamps		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Sharp Edges & Scratches		<input checked="" type="checkbox"/>	75%		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
Front Directional Lamps		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Rear Bumper & Fenders		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Cracks & Damage		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Right Rear Tire		<input checked="" type="checkbox"/>
Signal Mechanism		<input checked="" type="checkbox"/>	Mirrors		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Signal Indicator		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Projecting Parts		<input checked="" type="checkbox"/>	Tire Wear		<input checked="" type="checkbox"/>
Hood/Trunk Latch		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Tail Lamps		<input checked="" type="checkbox"/>	Regrooved/Recut		<input checked="" type="checkbox"/>
Latch		<input checked="" type="checkbox"/>	Clear View		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Sludded		<input checked="" type="checkbox"/>
Front Bumper & Fenders		<input checked="" type="checkbox"/>	Outside Mirror II		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Rear Window & Dad		<input checked="" type="checkbox"/>	Wiring or Connections		<input checked="" type="checkbox"/>	75%		<input checked="" type="checkbox"/>
Mounting		<input checked="" type="checkbox"/>	Left Windows		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	Right Windows		<input checked="" type="checkbox"/>
Projecting Parts		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>	Brake Lamps		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
Front Suspension		<input checked="" type="checkbox"/>	Operation		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
Shocks		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
			Cloudiness		<input checked="" type="checkbox"/>	License Plate Lamp		<input checked="" type="checkbox"/>	Right Door Latches		<input checked="" type="checkbox"/>
Left Front Tire		<input checked="" type="checkbox"/>	Left Door Latches		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>
Cuts or Snags		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Right Front Tire		<input checked="" type="checkbox"/>
Tire Wear		<input checked="" type="checkbox"/>	Speed Indicator		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Regrooved/Recut		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Rear Directional Lamps		<input checked="" type="checkbox"/>	Tire Wear		<input checked="" type="checkbox"/>
Sludded		<input checked="" type="checkbox"/>	Brakes		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	Regrooved/Recut		<input checked="" type="checkbox"/>
Wheel & Rim		<input checked="" type="checkbox"/>	Pedal Reserve		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>	Sludded		<input checked="" type="checkbox"/>
60%		<input checked="" type="checkbox"/>	Parking Brake		<input checked="" type="checkbox"/>	Back Up Lamp		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Steering		<input checked="" type="checkbox"/>	AIR BRAKES		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>
Loose or Binding		<input checked="" type="checkbox"/>	Seal Bells		<input checked="" type="checkbox"/>	Cancel		<input checked="" type="checkbox"/>	Miscellaneous		<input checked="" type="checkbox"/>
Lash		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Exhaust & Fuel		<input checked="" type="checkbox"/>	This vehicle has a		<input checked="" type="checkbox"/>
Bells		<input checked="" type="checkbox"/>	Legal		<input checked="" type="checkbox"/>	Adequate Exhaust		<input checked="" type="checkbox"/>	AATAC 50 ton fully		<input checked="" type="checkbox"/>
			Webbing		<input checked="" type="checkbox"/>	Tailpipe		<input checked="" type="checkbox"/>	hydraulic wrecker		<input checked="" type="checkbox"/>
Horn		<input checked="" type="checkbox"/>	Anchors		<input checked="" type="checkbox"/>	Legal Muffler		<input checked="" type="checkbox"/>	with an underreach		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Buckles		<input checked="" type="checkbox"/>	Modified thru		<input checked="" type="checkbox"/>	and a rotating boom		<input checked="" type="checkbox"/>
Audible		<input checked="" type="checkbox"/>				Pass. COMPALL		<input checked="" type="checkbox"/>	This truck can lift		<input checked="" type="checkbox"/>
Horn Button or Ring		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>	and winch from any		<input checked="" type="checkbox"/>
								<input checked="" type="checkbox"/>	angle.		<input checked="" type="checkbox"/>

I, Floyds & Sons Inc. am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

X *Floyd Leonard G.*
(Signature of Owner)

6-15-10 X
(Date)

(Witness—Must be Law Officer)

(Date)

CERTIFICATE OF VEHICLE INSPECTION

MAND 4060 5R3 (formerly DSP-4060)

State of Wisconsin / Department of Transportation

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 2006 Peterbuilt #115

Owner's Name
Floyd and Sons Inc.
 Address - Street or RFD
1525 Durand Avenue
 City
Racine State
WI Zip Code
53403

CHECK ONE:
 V.I.N. **1NPFLB9X36N643489**
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
 A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
 A motor vehicle that was previously junked; OR,
 Other vehicle (reason for inspection **SAFETY INSPECTION FOR CITY TOWING LIST**)
 See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass Floyd Leonard
 (Signature of Inspecting Authority—Title/Badge No.) 6-15-10
(Date)

VEHICLE INSPECTION CHECK LIST				Odometer Reading _____				
Item	Not OK	OK	Item	Not OK	OK	Item	Not OK	OK
Headlamps		<input checked="" type="checkbox"/>	Windshield Wiper		<input checked="" type="checkbox"/>	Seats		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>
Adequate or Legal		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Left Rear Tire		<input checked="" type="checkbox"/>
Beam Indicator		<input checked="" type="checkbox"/>	Contact		<input checked="" type="checkbox"/>	Cuts or Snags		<input checked="" type="checkbox"/>
Dimmer Switch		<input checked="" type="checkbox"/>				Tire Wear		<input checked="" type="checkbox"/>
			Windshield			Regrooved/Recut		<input checked="" type="checkbox"/>
Front Parking Lamps		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>	Studded		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>	Wheel & Rim		<input checked="" type="checkbox"/>
Front Directional Lamps		<input checked="" type="checkbox"/>	Sharp Edges & Scratches		<input checked="" type="checkbox"/>	40%		<input checked="" type="checkbox"/>
Working		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Rear Bumper & Fenders		<input checked="" type="checkbox"/>
Signal Mechanism		<input checked="" type="checkbox"/>	Cracks & Damage		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>
Signal Indicator		<input checked="" type="checkbox"/>	Mirrors		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>
Hood/Trunk Latch		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Projecting Parts		<input checked="" type="checkbox"/>
Latch		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Tail Lamps		<input checked="" type="checkbox"/>
Front Bumper & Fenders		<input checked="" type="checkbox"/>	Clear View		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Outside Mirror If Real Windows Is Bad		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>
Mounting		<input checked="" type="checkbox"/>	Left Windows		<input checked="" type="checkbox"/>	Wiring or Connections		<input checked="" type="checkbox"/>
Projecting Parts		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Front Suspension		<input checked="" type="checkbox"/>	Operation		<input checked="" type="checkbox"/>	Right Windows		<input checked="" type="checkbox"/>
Shocks		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>
			Cloudiness		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>
Left Front Tire		<input checked="" type="checkbox"/>	Left Door Latches		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>
Cuts or Snags		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>	Brake Lamps		<input checked="" type="checkbox"/>
Tire Wear		<input checked="" type="checkbox"/>	Speed Indicator		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>
Regrooved/Recut		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Adequate or Legal		<input checked="" type="checkbox"/>
Studded		<input checked="" type="checkbox"/>				License Plate Lamp		<input checked="" type="checkbox"/>
Wheel & Rim		<input checked="" type="checkbox"/>	Brakes		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>
80%			Pedal Reserve		<input checked="" type="checkbox"/>	Rear Directional Lamps		<input checked="" type="checkbox"/>
Steering			Parking Brake		<input checked="" type="checkbox"/>	Working		<input checked="" type="checkbox"/>
Loose or Binding			AIR BRAKES		<input checked="" type="checkbox"/>	Rear Directional Lamps		<input checked="" type="checkbox"/>
Lash		<input checked="" type="checkbox"/>				Working		<input checked="" type="checkbox"/>
Belts		<input checked="" type="checkbox"/>	Seat Belts		<input checked="" type="checkbox"/>	Cancel		<input checked="" type="checkbox"/>
			Equipped		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Horn		<input checked="" type="checkbox"/>	Legal		<input checked="" type="checkbox"/>	Miscellaneous		<input checked="" type="checkbox"/>
Equipped		<input checked="" type="checkbox"/>	Webbing		<input checked="" type="checkbox"/>	This vehicle has		<input checked="" type="checkbox"/>
Audible		<input checked="" type="checkbox"/>	Legal Muffler		<input checked="" type="checkbox"/>	a Vulcan V-70, a		<input checked="" type="checkbox"/>
Horn Button or Ring		<input checked="" type="checkbox"/>	Modified thru Pass. Comp. Act.		<input checked="" type="checkbox"/>	fully hydraulic		<input checked="" type="checkbox"/>
						unit, with the		<input checked="" type="checkbox"/>
						capacity of		<input checked="" type="checkbox"/>
						lifting 70,000		<input checked="" type="checkbox"/>
						pounds.		<input checked="" type="checkbox"/>

I, Floyd & Sons, Inc. am the owner of the vehicle and I understand that I am responsible for maintain the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

X Mick Leonard 6-15-10 X
 (Signature of Owner) (Date) (Witness—Must be Law Officer) (Date)

CERTIFICATE OF VEHICLE INSPECTION

MVD-4060 583 (formerly DSP-4060)

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File

State of Wisconsin / Department of Transportation

2003 IHC #17

Owner's Name Floyd and Sons Inc
 Address - Street or RFD 1525 Durand Ave
 City Racine State WI Zip Code 53403

CHECK ONE:
 V.I.N. 1HTMKADN73H568780
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:

- A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
- A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
- A motor vehicle that was previously junked; OR,
- Other vehicle (reason for inspection Safety Inspection for City Towing List)
- See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass Floyd Leonard

(Signature of Inspecting Authority—Title/Badge No.)

6-23-10
(Date)

VEHICLE INSPECTION CHECK LIST

Headlamps				Windshield Wiper				Seats				Odometer Reading			
Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK	Not OK	OK		
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
Working		Equipped		Mounting		Shocks		Left Rear Tire		Spring			<input checked="" type="checkbox"/>		
Adequate or Legal		Condition		Cuts or Snags		Modified		Tire Wear		Trunk/Hood Latch					
Beam Indicator		Contact		Regrooved/Recut		Latch		Windshield		Rear Window			<input checked="" type="checkbox"/>		
Dimmer Switch				Studded		Rear Window		Type Glass		Type Glass			<input checked="" type="checkbox"/>		
		Windshield		Wheel & Rim		Nontransparent Materials		Cloudiness		Cloudiness			<input checked="" type="checkbox"/>		
Front Parking Lamps		Type Glass		<u>85%</u>		Right Rear Tire		Sharp Edges & Scratches		Right Rear Tire			<input checked="" type="checkbox"/>		
Working		Cloudiness		<u>85%</u>		Cloudiness		Nontransparent Materials		Right Rear Tire			<input checked="" type="checkbox"/>		
Front Directional Lamps		Nontransparent Materials		<u>85%</u>		Right Rear Tire		Cracks & Damage		Right Rear Tire			<input checked="" type="checkbox"/>		
Working		Cracks & Damage		<u>85%</u>		Right Rear Tire		Mirrors		Right Rear Tire			<input checked="" type="checkbox"/>		
Signal Mechanism		Mirrors		<u>85%</u>		Right Rear Tire		Mounting		Right Rear Tire			<input checked="" type="checkbox"/>		
Signal Indicator		Mounting		<u>85%</u>		Right Rear Tire		Projecting Parts		Right Rear Tire			<input checked="" type="checkbox"/>		
<u>Hood</u> Trunk Latch		Condition		<u>85%</u>		Right Rear Tire		Tail Lamps		Right Rear Tire			<input checked="" type="checkbox"/>		
Latch		Clear View		<u>85%</u>		Right Rear Tire		Working		Right Rear Tire			<input checked="" type="checkbox"/>		
Front Bumper & Fenders		Outside Mirror if Rear Window is Bad		<u>85%</u>		Right Rear Tire		Adequate or Legal		Right Rear Tire			<input checked="" type="checkbox"/>		
Equipped		Left Windows		<u>85%</u>		Right Rear Tire		Wiring or Connections		Right Rear Tire			<input checked="" type="checkbox"/>		
Mounting		Type Glass		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Projecting Parts		Operation		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Front Suspension		Nontransparent Materials		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Shocks		Cloudiness		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
		Left Door Latches		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Left Front Tire		Hold		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Cuts or Snags		Speed Indicator		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Tire Wear		Equipped		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Regrooved/Recut				<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Studded		Brakes		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Wheel & Rim		Pedal Reserve		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
<u>85%</u>		Parking Brake		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Steering		<u>AIR BRAKES</u>		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Loose or Binding				<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Lash				<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Belts		Seal Belts		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
		Equipped		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
		Legal		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Horn		Webbing		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Equipped		Anchor		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Audible		Buckles		<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		
Horn Button or Ring				<u>85%</u>		Right Rear Tire				Right Rear Tire			<input checked="" type="checkbox"/>		

I, Floyd and Sons Inc am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

Floyd Leonard
(Signature of Owner)

6-23-10
(Date)

(Witness—Must be Law Officer)

(Date)

CERTIFICATE OF VEHICLE INSPECTION

State of Wisconsin / Department of Transportation

MVD-4060 583 (formerly DSP-4060)

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 1992 KW #18

Owner's Name
Floyd & Sons, Inc.
Address - Street or RFD
1525 Durand Ave.
City
Racine State
WI Zip Code
53403

CHECK ONE:
 V.I.N. **1XKAD59X0NJ575291**
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
 A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
 A motor vehicle that was previously junked; OR,
 Other vehicle (reason for inspection) **SAFETY INSPECTION FOR CITY TOWING LIST**

See reverse for remarks and other rejection reason(s).
I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass *Phy. Leonard G.* (Signature of Inspecting Authority—Title/Badge No.) **6-15-10** (Date)

VEHICLE INSPECTION CHECK LIST						Odometer Reading				
	Not OK	OK		Not OK	OK	Not OK	OK		Not OK	OK
Headlamps		<input checked="" type="checkbox"/>	Windshield Wiper		<input checked="" type="checkbox"/>	Seats				
Working		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Mounting				
Adequate or Legal		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Left Rear Tire				
Beam Indicator		<input checked="" type="checkbox"/>	Contact		<input checked="" type="checkbox"/>	Cuts or Snags				
Dimmer Switch		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	Tire Wear				
					<input checked="" type="checkbox"/>	Regrooved/Recut				
			Windshield		<input checked="" type="checkbox"/>	Studded				
Front Parking Lamps		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>	wheel & Rim				
Working		<input checked="" type="checkbox"/>	Cloudiness		<input checked="" type="checkbox"/>					
Front Directional Lamps		<input checked="" type="checkbox"/>	Sharp Edges & Scratches		<input checked="" type="checkbox"/>	Rear Bumper & Fenders				
Working		<input checked="" type="checkbox"/>	Nontransparent Materials		<input checked="" type="checkbox"/>	Equipped				
Signal Mechanism		<input checked="" type="checkbox"/>	Cracks & Damage		<input checked="" type="checkbox"/>	Mounting				
Signal Indicator		<input checked="" type="checkbox"/>	Mirrors		<input checked="" type="checkbox"/>	Projecting Parts				
Hood/Trunk Latch		<input checked="" type="checkbox"/>	Mounting		<input checked="" type="checkbox"/>	Tail Lamps				
Latch		<input checked="" type="checkbox"/>	Condition		<input checked="" type="checkbox"/>	Working				
Front Bumper & Fenders		<input checked="" type="checkbox"/>	Clear View		<input checked="" type="checkbox"/>	Adequate or Legal				
Equipped		<input checked="" type="checkbox"/>	Outside Mirror II		<input checked="" type="checkbox"/>	Wiring or Connections				
Mounting		<input checked="" type="checkbox"/>	Real Window Is Bad		<input checked="" type="checkbox"/>					
Projecting Parts		<input checked="" type="checkbox"/>	Left Windows		<input checked="" type="checkbox"/>	Right Windows				
Front Suspension		<input checked="" type="checkbox"/>	Type Glass		<input checked="" type="checkbox"/>	Type Glass				
Shocks		<input checked="" type="checkbox"/>	Operation		<input checked="" type="checkbox"/>	Nontransparent Materials				
			Nontransparent Materials		<input checked="" type="checkbox"/>	Cloudiness				
			Cloudiness		<input checked="" type="checkbox"/>	Brake Lamps				
			Left Door Latches		<input checked="" type="checkbox"/>	Working				
Left Front Tire		<input checked="" type="checkbox"/>	Hold		<input checked="" type="checkbox"/>	Adequate or Legal				
Cuts or Snags		<input checked="" type="checkbox"/>	Speed Indicator		<input checked="" type="checkbox"/>	License Plate Lamp				
Tire Wear		<input checked="" type="checkbox"/>	Equipped		<input checked="" type="checkbox"/>	Working				
Regrooved/Recut					<input checked="" type="checkbox"/>	Rear Directional Lamps				
Studded			Brakes		<input checked="" type="checkbox"/>	Working				
Wheel & Rim		<input checked="" type="checkbox"/>	Pedal Reserve		<input checked="" type="checkbox"/>	Adequate or Legal				
			Parking Brake		<input checked="" type="checkbox"/>	Back Up Lamp				
Steering		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	Working				
Loose or Binding		<input checked="" type="checkbox"/>	AIR BRAKES		<input checked="" type="checkbox"/>	Cancel				
Lash		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
Belts		<input checked="" type="checkbox"/>	Seal Belts		<input checked="" type="checkbox"/>	Exhaust & Fuel				
			Equipped		<input checked="" type="checkbox"/>	Adequate Exhaust				
			Legal		<input checked="" type="checkbox"/>	Tallpipe				
Horn		<input checked="" type="checkbox"/>	Webbing		<input checked="" type="checkbox"/>	Legal Muffler				
Equipped		<input checked="" type="checkbox"/>	Anchor		<input checked="" type="checkbox"/>	Modified thru				
Audible		<input checked="" type="checkbox"/>	Buckles		<input checked="" type="checkbox"/>	Pass. Compart.				
Horn Button or Ring		<input checked="" type="checkbox"/>								

I, **Floyd & Sons, Inc.** am the owner of the vehicle and I understand that I am responsible for maintain the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.
X *Phy. Leonard G.* **6-15-10** X
(Signature of Owner) (Date) (Witness—Must be Law Officer) (Date)

Miscellaneous
This vehicle has a Challenger CH-30 fully hydraulic boom and under reach. T unit has the capacity to lift 60,000 lbs.

Owner's Name FLOYD AND SONS INC
Address - Street or RFD _____
City 1525 DURAND AVE State WI Zip Code 53403

CHECK ONE:
 V.I.N. 1S9AT4L0XKC185147
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
 A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
 A motor vehicle that was previously junked; OR,
 Other vehicle (reason for inspection SAFETY INSPECTION FOR CITY TOWING LIST)
 See reverse for remarks and other rejection reason(s).

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass X [Signature] (Signature of Inspecting Authority - Title/Badge No.) 10-17-10 (Date)

VEHICLE INSPECTION CHECK LIST

VEHICLE INSPECTION CHECK LIST					Odometer Reading	
	Not OK	OK		Not OK	OK	
Headlamps			Windshield Wiper			Rear Suspension
Working		X	Equipped		X	Shocks
Adequate or Legal		X	Condition		X	Springs <u>HARD RUBBER</u>
Beam Indicator		X	Contact		X	Modified
Dimmer Switch		X				Trunk/Hood Latch
			Windshield			Latch
Front Parking Lamps			Type Glass		X	Rear Window
Working		X	Cloudiness		X	Type Glass
Front Directional Lamps			Sharp Edges & Scratches		X	Nontransparent Materials
Working		X	Nontransparent Materials		X	Cloudiness
Signal Mechanism		X	Cracks & Damage		X	Right Rear Tire
Signal Indicator		X	Mirrors		X	Cuts or Snags
Hood/Trunk Latch			Mounting		X	Tire Wear
Latch		X	Condition		X	Regrooved/Recut
Front Bumper & Fenders			Clear View		X	Studded
Equipped		X	Outside Mirror II		X	Working
Mounting		X	Rear Window & Bad		X	Adequate or Legal
Projecting Parts		X	Left Windows		X	Wiring or Connections
Front Suspension			Type Glass		X	Right Windows
Shocks		X	Operation		X	Type Glass
			Nontransparent Materials		X	Nontransparent Materials
			Cloudiness		X	Cloudiness
Left Front Tire			Left Door Latches		X	Right Door Latches
Cuts or Snags		X	Hold		X	Hold
Tire Wear		X	Speed Indicator		X	Right Front Tire
Regrooved/Recut			Equipped		X	Cuts or Snags
Studded						Tire Wear
Wheel & Rim		X	Brakes		X	Regrooved/Recut
<u>80%</u>			Pedal Reserve		X	Studded
			Parking Brake		X	Wheel & Rim
Steering			<u>AIR BRAKES</u>		X	Working
Loose or Binding		X			X	Cancel
Lash		X			X	Miscellaneous
Bells		X	Seal Bells		X	This vehicle has a
			Equipped		X	Century 45 ton full
			Legal		X	hydraulic wrecker
Horn			Webbing		X	with an underreach
Equipped		X	Anchor		X	and a rotating boom
Audible		X	Buckles		X	This unit can lift
Horn Button or Ring		X				and winch from any
						angle.

I, _____ am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.

X [Signature] (Signature of Owner) 10-17-10 (Date) X _____ (Witness - Must be Law Officer) _____ (Date)

CERTIFICATE OF VEHICLE INSPECTION

MVD 4060 583 (formerly DSP-4060)

State of Wisconsin / Department of Transportation
Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 2007 Intl flatbed #21

Owner's Name **Floyd and Sons Inc**
 Address - Street or RFD **1525 Durand Ave**
 City **Racine** State **WI** Zip Code **53403**

CHECK ONE:
 V.I.N. **1HTMMAAL97H434310**
 Engine No. _____
 No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE:
 A homemade motor vehicle which has been constructed or assembled from new or used parts or both using body and frame NOT ORIGINATING from any previously manufactured motor vehicle; OR,
 A reconstructed motor vehicle assembled from a vehicle manufactured 20 years or more prior to time of this application, and which has been substantially altered or modified from original manufacturer's specifications; OR,
 A motor vehicle that was previously junked; OR,
 Other vehicle (reason for inspection **Safety Inspection for City Towing List**)

See reverse for remarks and other rejection reason(s).
 I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below.

Inspection Fail Pass **Floyd Leonard** (Signature of Inspecting Authority—Title/Badge No.) **6-22-10** (Date)

VEHICLE INSPECTION CHECK LIST												Odometer Reading _____			
		Not OK	OK			Not OK	OK			Not OK	OK			Not OK	OK
Headlamps			<input checked="" type="checkbox"/>	Windshield Wiper			<input checked="" type="checkbox"/>	Seats			<input checked="" type="checkbox"/>	Rear Suspension			<input checked="" type="checkbox"/>
Working			<input checked="" type="checkbox"/>	Equipped			<input checked="" type="checkbox"/>	Mounting			<input checked="" type="checkbox"/>	Shocks			<input checked="" type="checkbox"/>
Adequate or Legal			<input checked="" type="checkbox"/>	Condition			<input checked="" type="checkbox"/>	Left Rear Tire				Springs			<input checked="" type="checkbox"/>
Beam Indicator			<input checked="" type="checkbox"/>	Contact			<input checked="" type="checkbox"/>	Cuts or Snags			<input checked="" type="checkbox"/>	Modified			
Dimmer Switch			<input checked="" type="checkbox"/>					Tire Wear			<input checked="" type="checkbox"/>	Trunk/Hood Latch			
								Regrooved/Recut				Latch			<input checked="" type="checkbox"/>
				Windshield				Studded				Rear Window			
Front Parking Lamps			<input checked="" type="checkbox"/>	Type Glass			<input checked="" type="checkbox"/>	Wheel & Rim			<input checked="" type="checkbox"/>	Type Glass			<input checked="" type="checkbox"/>
Working			<input checked="" type="checkbox"/>	Cloudiness			<input checked="" type="checkbox"/>	7090				Nontransparent Materials			<input checked="" type="checkbox"/>
Front Directional Lamps			<input checked="" type="checkbox"/>	Sharp Edges & Scratches			<input checked="" type="checkbox"/>					Cloudiness			<input checked="" type="checkbox"/>
Working			<input checked="" type="checkbox"/>	Nontransparent Materials			<input checked="" type="checkbox"/>	Rear Bumper & Fenders				Right Rear Tire			
Signal Mechanism			<input checked="" type="checkbox"/>	Cracks & Damage			<input checked="" type="checkbox"/>	Equipped			<input checked="" type="checkbox"/>	Cuts or Snags			<input checked="" type="checkbox"/>
Signal Indicator			<input checked="" type="checkbox"/>	Mirrors				Mounting			<input checked="" type="checkbox"/>	Tire Wear			<input checked="" type="checkbox"/>
Hood/Trunk Latch			<input checked="" type="checkbox"/>	Mounting				Projecting Parts			<input checked="" type="checkbox"/>	Regrooved/Recut			
Latch			<input checked="" type="checkbox"/>	Condition				Tail Lamps				Studded			
Front Bumper & Fenders				Clear View				Working			<input checked="" type="checkbox"/>	Wheel & Rim			<input checked="" type="checkbox"/>
Equipped			<input checked="" type="checkbox"/>	Outside Mirror If Rear Window Is Bad			<input checked="" type="checkbox"/>	Adequate or Legal			<input checked="" type="checkbox"/>	7090			
Mounting			<input checked="" type="checkbox"/>	Left Windows				Wiring or Connections			<input checked="" type="checkbox"/>				
Projecting Parts			<input checked="" type="checkbox"/>	Type Glass			<input checked="" type="checkbox"/>					Right Windows			
Front Suspension				Operation			<input checked="" type="checkbox"/>					Type Glass			<input checked="" type="checkbox"/>
Shocks			<input checked="" type="checkbox"/>	Nontransparent Materials			<input checked="" type="checkbox"/>	Brake Lamps				Cloudiness			<input checked="" type="checkbox"/>
				Cloudiness			<input checked="" type="checkbox"/>	Working			<input checked="" type="checkbox"/>	Right Door Latches			
Left Front Tire				Left Door Latches			<input checked="" type="checkbox"/>	Adequate or Legal			<input checked="" type="checkbox"/>	Hold			<input checked="" type="checkbox"/>
Cuts or Snags			<input checked="" type="checkbox"/>	Hold			<input checked="" type="checkbox"/>	License Plate Lamp				Right Front Tire			
Tire Wear			<input checked="" type="checkbox"/>	Speed Indicator			<input checked="" type="checkbox"/>	Working			<input checked="" type="checkbox"/>	Cuts or Snags			<input checked="" type="checkbox"/>
Regrooved/Recut				Equipped			<input checked="" type="checkbox"/>	Rear Directional Lamps				Tire Wear			<input checked="" type="checkbox"/>
Studded				Brakes				Working			<input checked="" type="checkbox"/>	Regrooved/Recut			
Wheel & Rim			<input checked="" type="checkbox"/>	Pedal Reserve			<input checked="" type="checkbox"/>	Adequate or Legal			<input checked="" type="checkbox"/>	Studded			
70%				Parking Brake			<input checked="" type="checkbox"/>	Back Up Lamp				Wheel & Rim			<input checked="" type="checkbox"/>
Steering								Working			<input checked="" type="checkbox"/>	70%			
Loose or Binding			<input checked="" type="checkbox"/>	AIR BRAKES				Cancel			<input checked="" type="checkbox"/>				
Lash			<input checked="" type="checkbox"/>									Miscellaneous			
Belts			<input checked="" type="checkbox"/>	Seal Belts				Exhaust & Fuel				This vehicle has			
				Equipped			<input checked="" type="checkbox"/>	Adequate Exhaust			<input checked="" type="checkbox"/>	a JerrDan 21ft.			
				Legal			<input checked="" type="checkbox"/>	Tailpipe			<input checked="" type="checkbox"/>	hydraulic flatbed			
Horn				Webbing			<input checked="" type="checkbox"/>	Legal Muffler			<input checked="" type="checkbox"/>	(2 car hauler)			
Equipped			<input checked="" type="checkbox"/>	Anchors			<input checked="" type="checkbox"/>	Modified thru Pass. Compatt.				with a JerrDan			
Audible			<input checked="" type="checkbox"/>	Buckles			<input checked="" type="checkbox"/>					sidepuller			
Horn Button or Ring			<input checked="" type="checkbox"/>												

I, **Floyd and Sons Inc** am the owner of the vehicle and I understand that I am responsible for maintain the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians.
 X **Phil Leonard** **6-22-10** X
 (Signature of Owner) (Date) (Witness—Must be Law Officer) (Date)

CERTIFICATE OF VEHICLE INSPECTION

State of Wisconsin / Department of Transportation

MVD-4060 583 (formerly DSP-4060)

Original to Owner for MVD, 1st Copy: Owner - 2nd Copy: Dist. File 2003 Sterling Flatbed

Owner's Name: Floyd & Sons, Inc. Address: 1525 Durand Avenue City: Racine State: WI Zip Code: 53403

CHECK ONE: [X] V.I.N. 2FZACFBV33AK67006 [] Engine No. [] No Number - Needs One Assigned

TYPE OF VEHICLE - CHECK ONE: [] A homemade motor vehicle... [] A reconstructed motor vehicle... [] A motor vehicle that was previously junked... [X] Other vehicle (reason for inspection SAFETY INSPECTION FOR CITY TOWING LIST)

I certify that I have personally inspected the vehicle described above as indicated by the following check list and, in my opinion it complies with the safety law of this state and is in such mechanical condition that its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians unless shown as an inspection fail below. Inspection [] Fail [X] Pass X [Signature] 6-17-10 (Date)

VEHICLE INSPECTION CHECK LIST table with columns for Not OK, OK, and various vehicle components like Headlamps, Windshield Wiper, Seats, Rear Suspension, etc.

I, Floyd & Sons, Inc. am the owner of the vehicle and I understand that I am responsible for maintaining the vehicle in such mechanical condition that it complies with state law and its operation on public streets and highways will not jeopardize the safety of motorists or pedestrians. X [Signature] 6-17-10 X (Date) (Witness-Must be Law Officer) (Date)