

Receipt No. 252904

Amount 100.00

License No. _____

Fee: \$100.00

Account No. 101.030.649

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

RECEIVED
JUN 05 2006
CITY CLERK RACINE, WI

Date May 26, 2006

Expires June 30, 2007

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 BERES TOWING AND REPAIRS LLC

Business Address 1960 STATE ST. RACINE, WI Zip Code 53401

Individual (Name of Applicant) JEAN C. BERES - RICHARD E. BERES

Home Address 5012 SPRING ST. RACINE, WI 53406 Phone No. 262 886-0201

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

<u>RICHARD E. BERES</u>	<u>5012 SPRING ST. - RACINE, WI</u>	<u>262 886 0201</u>
<u>JEAN C. BERES</u>	<u>SAME</u>	

Corporation Name _____

Names, addresses, and phone numbers of officers:

Name, address, and phone number of person in charge:
RICHARD E. BERES Phone No. 262 886 0201 ⁶³⁷⁻⁹⁵⁵¹

* Insurance Underwriter: WEST BEND MUTUAL

Richard E. Beres
Signature of Applicant
Jean C. Beres
6/19/44

Date of Birth _____

* Attach insurance certificate