

Fees: \$100.00 Application
\$15.00 Record Check per person
\$15.00 / Per Vehicle

2112

Expires June 30, 20__

20183615-4

0698-25

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

FEIN#: 46-1163590

Wisconsin Seller Permit #: 456-102788746002

NAME OF PERSON IN CHARGE: JOHN STEINHOFF

TRADE NAME: RACINE RECOVERY PHONE: 262-994-0744

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 RACINE RECOVERY LLC

Business Address 2817 EATON LN RACINE WI Zip Code 53404

Yard Address (if different than business address) SAME

INDIVIDUAL OR PARTNERSHIP

Person's Name	Address & Home Phone Number	Date of Birth
ROBERT KUNECKO	2039 SETTLEMENT TRAIL RACINE 53406	
MIKE KUNECKO	1701 4 mile ROAD RACINE 53402	
ROA	262-994-8526	
MIKE	262-880-0660	

CORPORATION (NAME)

Title	Name	Address	Date of Birth
President			
Vice-President			
Secretary			
Treasurer			

Name, address, phone number, and date of birth for person in charge: JOHN STEINHOFF

7546 BOTTLING ROAD RACINE 53402 Phone No. 262-939-5706 Date of birth: 1 1

* Insurance Underwriter: _____


Signature of Applicant

Date of Birth

* Attach insurance certificate



Year	Make/Model	VIN#	Truck #
2009	International 4300	1HTMMAAN09H078625	9
2014	Ford F450	1FDUF4HY8EEA94104	14
2015	Hino 268A	5PVNJ8JN0F4S51842	15
2016	Freightliner M2 106	1FVACWDT1GHGZ2579	16
2017	Ram 5500	3C7WRNAL5HG676914	17
2020	Hino 268	5PVNJ8JN8L4S54015	20

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 2nd day of July, 2025.

Towing company name Racine Recovery

By: [Signature]

By: [Signature]



RACIREC-01

ESCHWABENLENDER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/2/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186

CONTACT NAME: Erin Schwabenlender
PHONE (A/C, No, Ext): (414) 283-4235 1235 **FAX (A/C, No):** (262) 717-9435
E-MAIL ADDRESS: eschwabenlender@robertsonryan.com

INSURED
Racine Recovery LLC
2817 Eaton Lane
Racine, WI 53404

INSURER(S) AFFORDING COVERAGE NAIC #
INSURER A: PIONEER SPECIALTY INSURANCE COMPANY 40312
INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		CPP 1233097	4/1/2025	4/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	X	CPP 1233084	4/1/2025	4/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		UMB 1039493	4/1/2025	4/1/2026	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in Nh) <input type="checkbox"/> Y/N N/A If yes, describe under DESCRIPTION OF OPERATIONS below					PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Garagekeeper/On Hook		CPP 1233084	4/1/2025	4/1/2026	100,000
A	Motor Truck Cargo		CPP 1233098	4/1/2025	4/1/2026	50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Racine, its elected and appointed officials, officers, employees and authorized representatives or volunteers are listed as additional insureds as respects auto liability.

2015 Hino #5PVNJ8JN0F4S51842
2014 Ford #1FDUF4HY8EEA94104
2016 Freightliner #1FVACWDT1GHGZ2579
2009 International #1HTMMAAN09H078625
SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

City of Racine
730 Washington
Racine, WI 53403

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



ADDITIONAL REMARKS SCHEDULE

AGENCY Robertson Ryan - Waukesha		NAMED INSURED Racine Recovery LLC 2817 Eaton Lane Racine, WI 53404 Racine	
POLICY NUMBER SEE PAGE 1		EFFECTIVE DATE: SEE PAGE 1	
CARRIER SEE PAGE 1	NAIC CODE SEE P 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:
 2020 Hino #5PVNJ8JN8L4S54015
 2017 Ram #3C7WRNAL5HG676914

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**DESIGNATED INSURED FOR
COVERED AUTOS LIABILITY COVERAGE**

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" for Covered Autos Liability Coverage under the Who Is An Insured provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Racine Recovery LLC Endorsement Effective Date: 04/01/2021
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SCHEDULE

Name Of Person(s) Or Organization(s): City of Racine 730 Washington Racine, WI 53403

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.
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Each person or organization shown in the Schedule is an "insured" for Covered Autos Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured provision contained in Paragraph **A.1.** of Section **II** – Covered Autos Liability Coverage in the Business Auto and Motor Carrier Coverage Forms and Paragraph **D.2.** of Section **I** – Covered Autos Coverages of the Auto Dealers Coverage Form.



WISCONSIN

0000042

Certificate of Vehicle Registration

Plate Number	Registration	Class	Gross Weight	Period	Product Number	Registration Number
HJ29434	HTK HTK	TRUK	32000	A	85246231099	C250090019099
Vehicle Identification Number	Year	Make	Expiration Date	Color	Fees: No	
HTMMAAN09H078625	2009	INTL	12/31/2025	BLACK	09	
D.O.C.F. MUST BE IN VEHICLE AT ALL TIMES			Amount Received	THIS IS NOT A BILL		
PRIVATE CARRIER			QTR	This Registration Certificate is not valid for Transfer of Ownership		
				Contact the Division of Motor Vehicles at: wisconsin.dmv.gov, 605-254-7447		
				PRIMARY ADDRESS: 6336 DOUGLAS AVE, RACINE, WI 53402		

0000042
 RACINE RECOVERY LLC
 2817 EATON LN
 RACINE, WI 53404-1735

PLATE(S) STAY WITH VEHICLE WHEN SOLD



Tired of misplacing or losing your renewal notices?

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eNotify (electronic notification) allows you to receive an email and text message in place of your paper renewal notices.



For more information, go to: wisconsin.dmv.gov/enotify

Do I need insurance?

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Visit wisconsin.dmv.gov for more details.



WISCONSIN INSURANCE IDENTIFICATION CARD

(STATE)
COMPANY NUMBER **40312** COMPANY **PIONEER SPECIALTY INSURANCE COMPANY**
 COMMERCIAL PERSONAL

POLICY NUMBER **CPP 1230084** EFFECTIVE DATE **04/01/2024** EXPIRATION DATE **04/01/2025**

YEAR **2009** MAKE/MODEL **International 4300** VEHICLE IDENTIFICATION NUMBER **1HTMMAAN09H078625**

AGENCY/COMPANY ISSUING CARD
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186

(414) 271-3575

INSURED **Racine Recovery LLC**
2619 Eaton Lane
Racine, WI 53404

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
62576535	RR 09
DATE 4/25	

MOTOR CARRIER OPERATOR RACINE Recovery	INSPECTOR'S NAME (PRINT OR TYPE) JASON DAHL
ADDRESS 2817 Kenton Lane	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE RACINE W. 53404	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 1HTMMA09H078625
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				12. WINDSHIELD GLAZING
X			a. Service Brakes				a. Vehicle parts, load, dunnage, spare tire, etc., secured.	X			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
X			b. Parking Brake System	X			b. Front End Structure				13. WINDSHIELD WIPERS
X			c. Brake Drums or Rotors	X			c. Intermodal Container Securement Devices	X			No missing, damaged, or inoperable wipers.
+			d. Brake Hose				7. STEERING MECHANISM				14. MOTORCOACH SEATS
+			e. Brake Tubing				a. Steering Wheel Free Play	X			Seats securely fastened to the vehicle structure.
X			f. Low Pressure Warning Device				b. Steering Column				15. REAR IMPACT GUARD
		NA	g. Tractor Protection Valve	X			c. Front Axle Beam/All Other Steering Components				In place, securely attached, proper size, proper placement (see 393.86).
V			h. Air Compressor	X			d. Steering Gear Box	X			16. OTHER
		NA	i. Electric Brakes	X			e. Pitman Arm				List any other condition(s) which may prevent safe operation of this vehicle.
		NA	j. Hydraulic Brakes	X			f. Power Steering				
X			k. Vacuum Systems	X			g. Ball and Socket Joints				
+			l. Antilock Brake System	X			h. Tie Rods and Drag Links				
+			m. Automatic Brake Adjusters	X			i. Nuts				
			2. COUPLING DEVICES				j. Steering System				
X			a. Fifth Wheels	X			8. SUSPENSION				
			b. Pintle Hooks	X			a. Axle Positioning Parts				
			c. Drawbar/Towbar Eye	X			b. Spring Assembly				
			d. Drawbar/Towbar Tongue	X			c. Torque, Radius or Tracking Components				
			e. Safety Devices	X			9. FRAME				
			f. Saddle-Mounts	X			a. Frame Members				
			3. EXHAUST SYSTEM				b. Tire and Wheel Clearance				
X			a. No leaks forward of/ directly below the driver/sleeper compartment.	X			c. Adjustable Axle Assemblies (Sliding Subframes)				
		NA	b. Bus: No leaking/ discharging in violation of standard.				10. TIRES				
			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.				a. Steer-Axle Tires				
+							b. All Other Tires				
			4. FUEL SYSTEM				c. Speed-Restricted Tires				
X			a. No visible leak.	X			11. WHEELS AND RIMS				
X			b. Fuel Tank Filler Cap				a. Lock or Side Ring				
X			c. Fuel tank securely attached.				b. Wheels and Rims				
			5. LIGHTING DEVICES				c. Fasteners				
X			All required lights/reflectors operable.	X			d. Welds				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION. ✓ OK X NEEDS REPAIR. NA IF ITEMS DO NOT APPLY. _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.



WISCONSIN

0000331

Certificate of Vehicle Registration

Product Number 60852231093				Registration Number C243530015313		
Plate Number EC60412	Registration HTK HTK	Chassis TRUK	Gross Weight 16000	Period Q	Color BLACK	Fleet No. 14
Vehicle Identification Number 1FDUF4HY8EEA94104		Year 2014	Make FORD	Expiration Date 09/30/2025	Amount Received \$ 217.25	

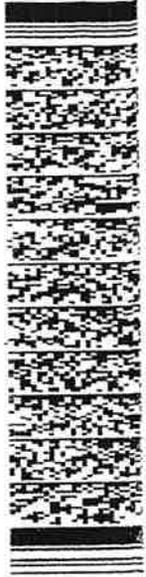
C OF R MUST BE IN VEHICLE AT ALL TIMES
PLATE(S) STAY WITH VEHICLE WHEN SOLD

QTR

THIS IS NOT A BILL
This Registration Certificate is not a Title. Not Valid for Transfer of Ownership.

0000331
RACINE RECOVERY LLC
2817 EATON LN
RACINE, WI 53404-1735

Contact the Division of Motor Vehicles at:
wisconsin.dmv.gov
608-254-7447
PRIMARY ADDRESS
5336 DOUGLAS AVE
RACINE, WI 53402



Tired of misplacing or losing your renewal notices?

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WISCONSIN INSURANCE IDENTIFICATION CARD

(STATE)

COMPANY NUMBER
40312COMPANY
PIONEER SPECIALTY INSURANCE COMPANY

COMMERCIAL



PERSONAL

POLICY NUMBER
CPP 1230084EFFECTIVE DATE
04/01/2024EXPIRATION DATE
04/01/2025YEAR
2014MAKE/MODEL
Ford F450VEHICLE IDENTIFICATION NUMBER
1FDUF4HY8EEA94104AGENCY/COMPANY ISSUING CARD
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186**(414) 271-3575**

INSURED ...

Racine Recovery LLC
2619 Eaton Lane
Racine, WI 53404

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
62576537	RR 14
DATE 4/25	

MOTOR CARRIER OPERATOR RACINE Recovery	INSPECTOR'S NAME (PRINT OR TYPE) JASON DAHL
ADDRESS 2817 EATOR LANE	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input type="checkbox"/> YES
CITY, STATE, ZIP CODE RACINE W. 53404	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 1FDPDF4HY8EEA94104
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				12. WINDSHIELD GLAZING
✓			a. Service Brakes	✓			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	✓			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
✓			b. Parking Brake System	✓			b. Front End Structure				13. WINDSHIELD WIPERS
✓			c. Brake Drums or Rotors				c. Intermodal Container Securement Devices	✓			No missing, damaged, or inoperable wipers.
✓			d. Brake Hose								14. MOTORCOACH SEATS
✓			e. Brake Tubing								Seats securely fastened to the vehicle structure.
	NA		f. Low Pressure Warning Device								15. REAR IMPACT GUARD
	NA		g. Tractor Protection Valve	✓			a. Steering Wheel Free Play	✓			In place, securely attached, proper size, proper placement (see 393.86).
	NA		h. Air Compressor	✓			b. Steering Column				16. OTHER
	NA		i. Electric Brakes	✓			c. Front Axle Beam/All Other Steering Components	✓			List any other condition(s) which may prevent safe operation of this vehicle.
✓			j. Hydraulic Brakes	✓			d. Steering Gear Box				
✓			k. Vacuum Systems	✓			e. Pitman Arm				
✓			l. Antilock Brake System	✓			f. Power Steering				
✓			m. Automatic Brake Adjusters	✓			g. Ball and Socket Joints				
			2. COUPLING DEVICES				7. STEERING MECHANISM				
	NA		a. Fifth Wheels	✓			a. Steering Wheel Free Play				
	NA		b. Pintle Hooks	✓			b. Steering Column				
✓			c. Drawbar/Towbar Eye	✓			c. Front Axle Beam/All Other Steering Components	✓			
✓			d. Drawbar/Towbar Tongue	✓			d. Steering Gear Box				
✓			e. Safety Devices	✓			e. Pitman Arm				
	NA		f. Saddle-Mounts	✓			f. Power Steering				
			3. EXHAUST SYSTEM				8. SUSPENSION				
✓			a. No leaks forward of/directly below the driver/sleeper compartment.	✓			a. Axle Positioning Parts				
	NA		b. Bus: No leaking/discharging in violation of standard.	✓			b. Spring Assembly				
✓			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.	✓			c. Torque, Radius or Tracking Components				
			4. FUEL SYSTEM				9. FRAME				
✓			a. No visible leak.	✓			a. Frame Members				
✓			b. Fuel Tank Filler Cap				b. Tire and Wheel Clearance				
✓			c. Fuel tank securely attached.				c. Adjustable Axle Assemblies (Sliding Subframes)				
			5. LIGHTING DEVICES				10. TIRES				
✓			All required lights/reflectors operable.	✓			a. Steer-Axle Tires				
							b. All Other Tires				
							c. Speed-Restricted Tires				
							11. WHEELS AND RIMS				
							a. Lock or Side Ring				
							b. Wheels and Rims				
							c. Fasteners				
							d. Welds				

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Certificate of Vehicle Registration

Plate Number: GD75617		Registration: HTK HTK	Chassis: TRUK	Gross Weight: 26000	Period: Q	Color: BLACK	Registration Number: C243530014013
Vehicle Identification Number: 5PVNJ8JN0F4S51842		Year: 2015	Make: HINO	Expiration Date: 09/30/2025	Amount Received: \$ 361.25		

C OF R MUST BE IN VEHICLE AT ALL TIMES
PLATE(S) STAY WITH VEHICLE WHEN SOLD

QTR

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wisconsindmv.gov
508-264-7447

PRIMARY ADDRESS
5336 DOUGLAS AVE
RACINE, WI 53402

0000328

RACINE RECOVERY LLC
2817 EATON LN
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(STATE)

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40312COMPANY
PIONEER SPECIALTY INSURANCE COMPANY

COMMERCIAL



PERSONAL

POLICY NUMBER
CPP 1230084EFFECTIVE DATE
04/01/2024EXPIRATION DATE
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2015MAKE/MODEL
Hino 268AVEHICLE IDENTIFICATION NUMBER
5PVNJ8JN0F4S51842AGENCY/COMPANY ISSUING CARD
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186**(414) 271-3575**

INSURED

Racine Recovery LLC
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Racine, WI 53404

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ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
62576535	RR 15
DATE	4-25

MOTOR CARRIER OPERATOR Racine Recovery	INSPECTOR'S NAME (PRINT OR TYPE) JASON DAHL
ADDRESS 2817 Kerton Lane	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input type="checkbox"/> YES
CITY, STATE, ZIP CODE Racine WI, 53404	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER SPVNS8NOF4551842
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				12. WINDSHIELD GLAZING
✓			a. Service Brakes	✓			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	✓			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
✓			b. Parking Brake System	✓			b. Front End Structure				13. WINDSHIELD WIPERS
✓			c. Brake Drums or Rotors				c. Intermodal Container Securement Devices	✓			No missing, damaged, or inoperable wipers.
✓			d. Brake Hose				7. STEERING MECHANISM			14. MOTORCOACH SEATS	
✓			e. Brake Tubing				a. Steering Wheel Free Play	✓			Seats securely fastened to the vehicle structure.
✓			f. Low Pressure Warning Device				b. Steering Column				15. REAR IMPACT GUARD
			g. Tractor Protection Valve				c. Front Axle Beam/All Other Steering Components	✓			In place, securely attached, proper size, proper placement (see 393.86).
			h. Air Compressor				d. Steering Gear Box				16. OTHER
			i. Electric Brakes				e. Pitman Arm				List any other condition(s) which may prevent safe operation of this vehicle.
			j. Hydraulic Brakes				f. Power Steering				
			k. Vacuum Systems				g. Ball and Socket Joints				
			l. Antilock Brake System				h. Tie Rods and Drag Links				
			m. Automatic Brake Adjusters				i. Nuts				
			2. COUPLING DEVICES				8. SUSPENSION				
			a. Fifth Wheels				a. Axle Positioning Parts				
			b. Pintle Hooks				b. Spring Assembly				
			c. Drawbar/Towbar Eye				c. Torque, Radius or Tracking Components				
			d. Drawbar/Towbar Tongue				9. FRAME				
			e. Safety Devices				a. Frame Members				
			f. Saddle-Mounts				b. Tire and Wheel Clearance				
			3. EXHAUST SYSTEM				c. Adjustable Axle Assemblies (Sliding Subframes)				
✓			a. No leaks forward of/ directly below the driver/ sleeper compartment.				10. TIRES				
			b. Bus: No leaking/ discharging in violation of standard.				a. Steer-Axle Tires				
			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.				b. All Other Tires				
			4. FUEL SYSTEM				c. Speed-Restricted Tires				
✓			a. No visible leak.				11. WHEELS AND RIMS				
✓			b. Fuel Tank Filler Cap				a. Lock or Side Ring				
✓			c. Fuel tank securely attached.				b. Wheels and Rims				
			5. LIGHTING DEVICES				c. Fasteners				
✓			All required lights/reflectors operable.				d. Welds				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION. ✓ OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY. REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.



Certificate of Vehicle Registration

Plate Number GD81899				Registration HTK HTK		Chassis TRUK		Gross Weight 26000		Period Q		Color BLACK		Registration Number C243530014435	
Vehicle Identification Number 1FVACWDT1GHGZ2579				Year 2016		Make FRHT		Expiration Date 09/30/2025		Amount Received \$ 361.25		Fleet No. 16			

C OF R MUST BE IN VEHICLE AT ALL TIMES
PLATE(S) STAY WITH VEHICLE WHEN SOLD

QTR

THIS IS NOT A BILL
This Registration Certificate is not a Title Not Valid for Transfer of Ownership.

Contact the Division of Motor Vehicles at:
wisconsindmv.gov
608-264-7447

PRIMARY ADDRESS
5336 DOUGLAS AVE
RACINE, WI 53402

0000329

RACINE RECOVERY LLC
2817 EATON LN
RACINE, WI 53404-1735



Tired of misplacing or losing your renewal notices?

Sign up to receive your driver's license/identification card and vehicle license plate renewal notices by email and text.

eNotify (electronic notification) allows you to receive an email and text message in place of your paper renewal notices.



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Do I need insurance?

Yes. In Wisconsin, you're required to have liability coverage for the vehicle you drive and carry proof of it when you are driving. If you don't, you can be fined up to \$500. If you are in an accident without the proper coverage, you may still be responsible for damages and lose your license.

Visit wisconsindmv.gov for more details.



VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
62576536	RR 16
DATE 4-25	

MOTOR CARRIER OPERATOR Racine Recovery	INSPECTOR'S NAME (PRINT OR TYPE) JASON DAHL
ADDRESS 2817 Eaton Lane	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE RACINE W. 53404	VEHICLE IDENTIFICATION (<input checked="" type="checkbox"/> AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 1FVACWOT1GH6Z2579
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			6. SAFE LOADING	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	<input checked="" type="checkbox"/>			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Front End Structure	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors				c. Intermodal Container Securement Devices	<input checked="" type="checkbox"/>			No missing, damaged, or inoperable wipers.
<input checked="" type="checkbox"/>			d. Brake Hose								14. MOTORCOACH SEATS
<input checked="" type="checkbox"/>			e. Brake Tubing								Seats securely fastened to the vehicle structure.
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device								15. REAR IMPACT GUARD
			g. Tractor Protection Valve				7. STEERING MECHANISM	<input checked="" type="checkbox"/>			In place, securely attached, proper size, proper placement (see 393.86).
			h. Air Compressor				a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			16. OTHER
			i. Electric Brakes				b. Steering Column				List any other condition(s) which may prevent safe operation of this vehicle.
			j. Hydraulic Brakes				c. Front Axle Beam/All Other Steering Components	<input checked="" type="checkbox"/>			
			k. Vacuum Systems				d. Steering Gear Box				
			l. Antilock Brake System				e. Pitman Arm				
			m. Automatic Brake Adjusters				f. Power Steering				
			2. COUPLING DEVICES				g. Ball and Socket Joints				
			a. Fifth Wheels				h. Tie Rods and Drag Links				
			b. Pintle Hooks				i. Nuts				
			c. Drawbar/Towbar Eye				j. Steering System				
			d. Drawbar/Towbar Tongue								
			e. Safety Devices				8. SUSPENSION				
			f. Saddle-Mounts				a. Axle Positioning Parts				
			3. EXHAUST SYSTEM				b. Spring Assembly				
			a. No leaks forward of/ directly below the driver/ sleeper compartment.				c. Torque, Radius or Tracking Components				
			b. Bus: No leaking/ discharging in violation of standard.				9. FRAME				
			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.				a. Frame Members				
			4. FUEL SYSTEM				b. Tire and Wheel Clearance				
			a. No visible leak.				c. Adjustable Axle Assemblies (Sliding Subframes)				
			b. Fuel Tank Filler Cap				10. TIRES				
			c. Fuel tank securely attached.				a. Steer-Axle Tires				
			5. LIGHTING DEVICES				b. All Other Tires				
			All required lights/reflectors operable.				c. Speed-Restricted Tires				
							11. WHEELS AND RIMS				
							a. Lock or Side Ring				
							b. Wheels and Rims				
							c. Fasteners				
							d. Welds				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY. _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

WISCONSIN INSURANCE IDENTIFICATION CARD

(STATE)

COMPANY NUMBER
40312COMPANY
PIONEER SPECIALTY INSURANCE COMPANY

COMMERCIAL



PERSONAL

POLICY NUMBER
CPP 1230084EFFECTIVE DATE
04/01/2024EXPIRATION DATE
04/01/2025YEAR
2016MAKE/MODEL
Freightliner M2 106VEHICLE IDENTIFICATION NUMBER
1FVACWDT1GHGZ2579AGENCY/COMPANY ISSUING CARD
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186**(414) 271-3575**

INSURED _

Racine Recovery LLC
2619 Eaton Lane
Racine, WI 53404

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMANDIN CASE OF ACCIDENT: Report all accidents to your Agent/Company as
soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.



Certificate of Vehicle Registration

Plate Number XE55317	Registration HTK HTK	Chassis TRUK	Gross Weight 10000	Period A	Color WHITE	Registration Number C243530014848
Vehicle Identification Number 3C7WRNAL5HG676914		Year 2017	Make RAM	Expiration Date 12/31/2025	Fleet No. 17 Amount Received \$ 160.00	

C OF R MUST BE IN VEHICLE AT ALL TIMES
INTRASTATE FOR HIRE CARRIER

QTR

THIS IS NOT A BILL
This Registration Certificate is not a Title. Not Valid for Transfer of Ownership.

0000327
RACINE RECOVERY LLC
2817 EATON LN
RACINE, WI 53404-1735

Contact the Division of Motor Vehicles at:
wisconsindmv.gov
608-264-7447
PRIMARY ADDRESS
5336 DOUGLAS AVE
RACINE, WI 53402

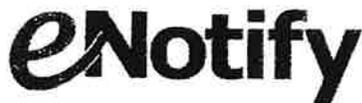
PLATE(S) STAY WITH VEHICLE WHEN SOLD



Tired of misplacing or losing your renewal notices?

Sign up to receive your driver's license/identification card and vehicle license plate renewal notices by email and text.

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(STATE)

COMPANY NUMBER
40312

COMPANY
PIONEER SPECIALTY INSURANCE COMPANY

COMMERCIAL PERSONAL

POLICY NUMBER
CPP 1230084

EFFECTIVE DATE
04/01/2024

EXPIRATION DATE
04/01/2025

YEAR
2017

MAKE/MODEL
Ram 5500

VEHICLE IDENTIFICATION NUMBER
3C7WRNAL5HG676914

AGENCY/COMPANY ISSUING CARD
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186

(414) 271-3575

INSURED -

Racine Recovery LLC
2619 Eaton Lane
Racine, WI 53404

SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER 62576539	FLEET UNIT NUMBER RR 17
DATE 4/25	

MOTOR CARRIER OPERATOR Racine Recovery	INSPECTOR'S NAME (PRINT OR TYPE) JASON DAHL
ADDRESS 2817 Fenton Lane	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input type="checkbox"/> YES
CITY, STATE, ZIP CODE Racine WI 53404	VEHICLE IDENTIFICATION (<input checked="" type="checkbox"/> AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 3C7WRAL5H6676914
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			6. SAFE LOADING	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	<input checked="" type="checkbox"/>			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Front End Structure	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Intermodal Container Securement Devices	<input checked="" type="checkbox"/>			No missing, damaged, or inoperable wipers.
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>			7. STEERING MECHANISM	<input checked="" type="checkbox"/>			14. MOTORCOACH SEATS
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			Seats securely fastened to the vehicle structure.
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			15. REAR IMPACT GUARD
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>			c. Front Axle Beam/All Other Steering Components	<input checked="" type="checkbox"/>			In place, securely attached, proper size, proper placement (see 393.86).
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			16. OTHER
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>			e. Pitman Arm				List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>			f. Power Steering				
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>			g. Ball and Socket Joints				
<input checked="" type="checkbox"/>			l. Antilock Brake System	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links				
<input checked="" type="checkbox"/>			m. Automatic Brake Adjusters	<input checked="" type="checkbox"/>			i. Nuts				
			2. COUPLING DEVICES	<input checked="" type="checkbox"/>			j. Steering System				
			a. Fifth Wheels	<input checked="" type="checkbox"/>			8. SUSPENSION				
			b. Pintle Hooks	<input checked="" type="checkbox"/>			a. Axle Positioning Parts				
			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			b. Spring Assembly				
			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components				
			e. Safety Devices	<input checked="" type="checkbox"/>			9. FRAME				
			f. Saddle-Mounts	<input checked="" type="checkbox"/>			a. Frame Members				
			3. EXHAUST SYSTEM	<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance				
			a. No leaks forward of/directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)				
			b. Bus: No leaking/discharging in violation of standard.	<input checked="" type="checkbox"/>			10. TIRES				
			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.	<input checked="" type="checkbox"/>			a. Steer-Axle Tires				
			4. FUEL SYSTEM	<input checked="" type="checkbox"/>			b. All Other Tires				
			a. No visible leak.	<input checked="" type="checkbox"/>			c. Speed-Restricted Tires				
			b. Fuel Tank Filler Cap	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS				
			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>			a. Lock or Side Ring				
			5. LIGHTING DEVICES	<input checked="" type="checkbox"/>			b. Wheels and Rims				
			All required lights/reflectors operable.	<input checked="" type="checkbox"/>			c. Fasteners				
				<input checked="" type="checkbox"/>			d. Welds				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: OK, NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.



WISCONSIN

Certificate of Vehicle Registration

0000330

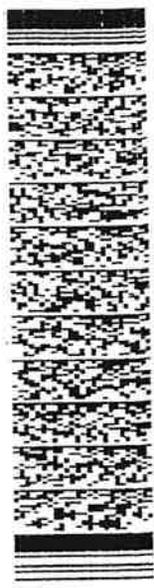
Product Number 75121231096	Registration Number C243530015023
Color BLACK	Fleet No 20
Expiration Date 12/31/2025	Amount Received \$ 475.00

Plate Number GD83777	Registration HTK HTK	Chassis TRUK	Gross Weight 26000	Period A
Vehicle Identification Number 5PVNJ8JN8L4S54015	Year 2020	Make HINO	Expiration Date 12/31/2025	

C OF R MUST BE IN VEHICLE AT ALL TIMES
PLATE(S) STAY WITH VEHICLE WHEN SOLD

0000330
RACINE RECOVERY LLC
2817 EATON LN
RACINE, WI 53404-1735

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RACINE, WI 53402



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WISCONSIN INSURANCE IDENTIFICATION CARD

(STATE)

COMPANY NUMBER
40312COMPANY
PIONEER SPECIALTY INSURANCE COMPANY COMMERCIAL PERSONALPOLICY NUMBER
CPP 1230084EFFECTIVE DATE
04/01/2024EXPIRATION DATE
04/01/2025YEAR
2020MAKE/MODEL
Hino 268VEHICLE IDENTIFICATION NUMBER
5PVNJ8JN8L4S54015AGENCY/COMPANY ISSUING CARD
Robertson Ryan - Waukesha
20975 Swenson Drive, Suite 175
Waukesha, WI 53186**(414) 271-3575**

INSURED

Racine Recovery LLC
2619 Eaton Lane
Racine, WI 53404

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VEHICLE AND PRESENTED UPON DEMANDIN CASE OF ACCIDENT: Report all accidents to your Agent/Company as
soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
62576538	RA 20
DATE	4-28

MOTOR CARRIER OPERATOR RACINE Recovery	INSPECTOR'S NAME (PRINT OR TYPE) JASON DAHL
ADDRESS 2817 Eaton Lane	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input type="checkbox"/> YES
CITY, STATE, ZIP CODE RACINE W. 53404	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input type="checkbox"/> VIN <input type="checkbox"/> OTHER 5PVNJ8JN8L4054015
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				12. WINDSHIELD GLAZING
✓			a. Service Brakes	✓			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	✓			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
✓			b. Parking Brake System	✓			b. Front End Structure				13. WINDSHIELD WIPERS
✓			c. Brake Drums or Rotors				c. Intermodal Container Securement Devices	✓			No missing, damaged, or inoperable wipers.
✓			d. Brake Hose				7. STEERING MECHANISM			14. MOTORCOACH SEATS	
✓			e. Brake Tubing	NA			a. Steering Wheel Free Play	✓			Seats securely fastened to the vehicle structure.
✓			f. Low Pressure Warning Device				b. Steering Column				15. REAR IMPACT GUARD
✓			g. Tractor Protection Valve	✓			c. Front Axle Beam/All Other Steering Components	✓			In place, securely attached, proper size, proper placement (see 393.86).
✓			h. Air Compressor	✓			d. Steering Gear Box				16. OTHER
✓			i. Electric Brakes	✓			e. Pitman Arm				List any other condition(s) which may prevent safe operation of this vehicle.
✓			j. Hydraulic Brakes	✓			f. Power Steering				
✓			k. Vacuum Systems	✓			g. Ball and Socket Joints				
✓			l. Antilock Brake System	✓			h. Tie Rods and Drag Links				
✓			m. Automatic Brake Adjusters	✓			i. Nuts				
			2. COUPLING DEVICES				8. SUSPENSION				
	NA		a. Fifth Wheels	✓			a. Axle Positioning Parts				
	NA		b. Pintle Hooks	✓			b. Spring Assembly				
✓			c. Drawbar/Towbar Eye	✓			c. Torque, Radius or Tracking Components				
✓			d. Drawbar/Towbar Tongue	✓			9. FRAME				
✓			e. Safety Devices	✓			a. Frame Members				
✓			f. Saddle-Mounts	✓			b. Tire and Wheel Clearance				
			3. EXHAUST SYSTEM				c. Adjustable Axle Assemblies (Sliding Subframes)				
✓			a. No leaks forward of/ directly below the driver/sleeper compartment.	✓			10. TIRES				
	NA		b. Bus: No leaking/ discharging in violation of standard.	✓			a. Steer-Axle Tires				
✓			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.	✓			b. All Other Tires				
			4. FUEL SYSTEM				c. Speed-Restricted Tires				
✓			a. No visible leak.	✓			11. WHEELS AND RIMS				
✓			b. Fuel Tank Filler Cap	✓			a. Lock or Side Ring				
✓			c. Fuel tank securely attached.	✓			b. Wheels and Rims				
			5. LIGHTING DEVICES				c. Fasteners				
✓			All required lights/reflectors operable.	✓			d. Welds				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ✓ OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY. _____ REPAIRED DATE

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