

Fees: \$50.00 **\$175.00**
~~\$5.00 Each Vehicle~~
~~\$15.00 Record Check Fee Each Individual~~

License to Expire on March 31, _____

☒ New ☐ Renewal

Application for Public Passenger Vehicle Provider's License

Name of Business: B+B Packaged Services LLC
FEIN #: 92-1980435

Pursuant to Article XXVIII of the Municipal Code of the City of Racine, application is hereby made for a license to operate the following type of business in the City of Racine:

☒ Taxicab ☐ Handicapped and Elderly Vehicle
☐ Shuttle Vehicle ☐ Horse and Surrey
☐ Luxury Limousine

Name of applicant (individual, partnership or association, or corporation)

Individual:

Name: Ronnie Dawson
Home Address: 1469 Grange Ave. Racine, WI 53405
Telephone Number: 262-822-7042

Partnership or Association:

Name: N/A
Home Address: N/A
Telephone Number: N/A

Name: N/A
Home Address: N/A
Telephone Number: N/A

Corporation:

Name of Corporation:

B+B Packaged Services

Place of Incorporation:

Racine, WI.

Names and addresses of officers, directors, and managing agent:

Roemie Dawson1409 Grange Ave. 1409 Grange Ave. 53405

Name of Business:

B+B Cabs

Business Address:

1409 Grange Ave.

Business Telephone:

262 822-7042**Answer the following questions fully and completely:**

List information relating to any felonies or misdemeanors within the five years prior to application, including place of conviction. Such information shall be provided for all officers, directors, and managing agents of a corporation or association and all partners of a partnership.

Name/Title	Date of Conviction	Place of Conviction	Sentence
<u>N/A</u>			
<u>N/A</u>			
<u>N/A</u>			
<u>N/A</u>			
<u>N/A</u>			

Financial status of applicant, including the amount, nature, and cause of any outstanding judgments against the applicant: N/A




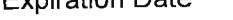
Experience of applicant in the public transportation business:

4 Yrs. School Bus Driver2 Yrs. Courier Service

Provide the name and address of the insurance company, and its agent, underwriting the insurance as required by Sec. 22-1051. (Copy of insurance policy or certificate of insurance must be filed with the City Clerk and reviewed by the City Attorney).

Name	License Number
Roamie Dawson	D-250-7308-1188-05

\$15 Five miles or less one-way, Racine City limits.

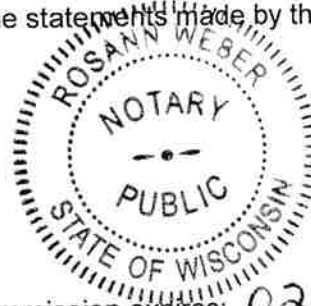
Signature of Applicant(s)	Date of Birth	Driver's License #	Expiration Date
			

State of Wisconsin)
)
County of Racine)

County of Nassau, Roamie Dawson, being
first duly sworn, on oath, says that (s)he/they are the persons(s) who made and signed the foregoing
application for a Public Passenger Provider's License, and that all the statements made by the applicant(s) are
true.

this 7th day of August, 20 25

Rosanne Weber
Notary Public, Racine County, Wisconsin



My commission expires: 02-28-2027

Public Passenger VehiclesName of Business: BtB Packaged Services (B+B cabs)Business Address: 1409 Grange Ave. Racine, WI 53405Business Telephone Number: 262 822-7042**Vehicle Inspection Certificate(s) and Insurance Policy or Certificate of Insurance are attached for the following vehicle(s) to be used pursuant to Article XXVIII of the Municipal Code.**

License Number Issued	Number of Passengers	Serial Number	Year	Make	Body	State License Number
	2	5J8TB3H32EL015498	2014	Acura	RDX	

The location(s) where the above vehicles will be kept:

Racine, WI

The name or names of any lien holders on the vehicles used or to be used:

Consumer Portfolio Services, Inc.

The color scheme or insignia to be used, if appropriate, to designate the vehicle or vehicles of the applicant:

N/A

Signature of Applicant(s)



Processed on Jun 1, 2025 at 05:37 p.m.

Outline of coverage

2014 ACURA RDX 4 DOOR 18ACON

VIN: 3J8TB3H32EL015495

Garaging ZIP Code: 53101

Primary use of the vehicle

Annual miles: 14,000 - 15

Length of vehicle ownership

Information regarding your

This vehicle has RideShare

ited or vehicle added: At least 1 month but less than 6 months

prior damage, theft or title issues) has impacted how we determine your premium.

	Limits	Deductible	Premium
Liability - Others			\$3,455
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$50,000 each accident		
Uninsured Motorist	\$25,000 each person/\$50,000 each accident		161
Underinsured Motorist	Rejected		-
Medical Payments	Rejected		-
Comprehensive	Actual Cash Value	\$1,000	108
Collision	Actual Cash Value	\$1,000	957
Total 6 month policy premium			\$4,681.00

Premium discounts

Policy

998015479

Paperless

Vehicle

2014 ACURA

Snapshot Participation

RDX

Storytelling & Conversations

TAXI CAB SAFETY AND PERFORMANCE CHECKLIST

LICENSEE NAME (OWNER): Rogmire Dawson TAXI CAB COMPANY NAME: B+B Packaged Services
 TYPE OF INSPECTION: ☐ New ☐ Renewal ☐ 6 Month VEHICLE INSPECTED: MAKE: ACURA RDX YEAR: 2014
 VEHICLE IDENTIFICATION NO.: 5J8TB3H32EL015498 STATE LICENSE PLATE NO.: A2S7542

WALK AROUND INSPECTION	UNDER HOOD	
Operation of all exterior lights. ✓	Check radiator for leaks/looseness. ✓	Transmission/trans axle mounts. ✓
All reflectors and lenses. ✓	Check nonelectric cooling fan for play. ✓	Drive line/U-joints/support bearings. ✓
Mirror mounts and glass. ✓	Pressure test cooling system. ✓	Engine exhaust system. ✓
Vehicle body/paint. ✓	Coolant hoses/recovery system. ✓	Inspect rear axle for oil leaks (if applicable). ✓
Bumpers. ✓	Record coolant protection level. ✓	Rear suspension. ✓
Hood/door/truck hatch hinges. ✓	Pressure test radiator cap. ✓	Rear brakes and hydraulic lines. ✓
Windshield/windows. ✓	Tension/Condition of all belts. ✓	Parking brake cables/operation. ✓
Roof. ✓	Power steering fluid level/hoses. ✓	Record rear brake lining thickness. ✓
	All accessory mounts/brackets. ✓	Inspect rear brake drum/rotor condition. ✓
	Fuel throttle linkage/cables. ✓	Fuel tank/supports/lines/cap. ✓
INTERIOR		DRIVE TEST
Seats/seat belts/shoulder harness. ✓	Check engine for major oil leaks. ✓	Operation of vehicle systems at normal operating temp. ✓
Door locks/latches/releases. ✓	Integrity of air intake system. ✓	Engine throttle response & performance. ✓
Floorboard and covering. ✓	Wiring/connections to electrical devices. ✓	Observe exhaust for excessive smoke emissions. ✓
Interior lighting. ✓	Battery area. ✓	Transmission/clutch operation. ✓
Instrument panel warning lights/gauges. ✓	Check/record battery state of charge and load test. ✓	Operation of all gauges & indicators. ✓
Engine operation. ✓	Ignition/distributor system. ✓	Steering wheel travel or bind. ✓
Horn operation. ✓	Emissions related component-visual. ✓	Observe road handling. ✓
Heater-A/C-Defroster controls. ✓	Check all fluid levels. ✓	Test brake operation at various road speeds. ✓
Rear view mirror/sun visors. ✓		Parking brake operation. ✓
Parking brake operation. ✓	UNDER CAR/CHASSIS	Listen for any unusual noises. ✓
Windshield, door and rear glass. ✓	Steering gear/rack & pinion mounts. ✓	
Switches & accessories operation. ✓	Steering shaft and linkage. ✓	
Steering wheel free travel. ✓	Check ball joints for wear. ✓	
Clutch pedal free travel (if applicable) ✓	Check struts/shocks for leaks. ✓	
	Front wheel bearing adjustment. ✓	
TIRES/WHEELS	C.V. shafts and boots. ✓	
Irregular wear (alignment). ✓	Front brakes and hydraulic lines. ✓	
Cuts and sidewall damage. ✓	Front brake drum/rotor condition. ✓	
Inspect valve caps. ✓		Wear limits, out of service criteria and specifications are obtained by the vehicle or component manufacturer. Accepted industry standards, practices and methods should be followed while performing the inspections.
Inspect thread depth at three locations - 2/32" min. ✓	Record front brake lining thickness. ✓	
Record thread depth for each tire. ✓	Record front brake rotor thickness. ✓	
Check/record tire pressures. Include spare tire. ✓	Brake vacuum/hydro boost operation. ✓	
Wheel nut torque. ✓	Front springs and mounts. ✓	
Missing or damaged axle studs. ✓	Engine supports/cushions. ✓	
Bent/damaged wheels. ✓	Starter and cables. ✓	
Check for spare & jack/lug wrench. ✓	Check for under car fluid leaks. ✓	

NAME OF BUSINESS PERFORMING INSPECTION: RIM Auto & Truck Repair

NAME OF PERSON PERFORMING INSPECTION: MICHAEL G. NELSON

A.S.E. CERTIFICATE NUMBER: _____

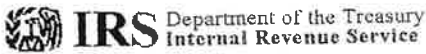
EXPIRES: _____

INSPECTOR'S SIGNATURE: Michael G. Nelson

DATE OF INSPECTION: 8/5/25

DATE OF INSPECTION: 8/5/25

(ATTACH COPY OF CERTIFICATE)



OGDEN UT 84201-0046

In reply refer to: 0424827200
Aug. 10, 2023 LTR 147C 0
92-1980435 000000 00
00006490
BODC: SB

B&B PACKAGED SERVICES
ROAMIE DAWSON SOLE MBR
1409 GRANGE AVE
RACINE WI 53405-5017

014860

Employer identification number: 92-1980435

Dear Taxpayer:

Thank you for your correspondence dated Mar. 10, 2023.

We have updated your account as requested.

You can get any of the forms or publications mentioned in this letter by visiting our website at [IRS.gov/forms](https://www.irs.gov/forms) or by calling 800-TAX-FORM (800-829-3676).

If you have questions, you can call us at 800-829-0115.

If you prefer, you can write to us at the address at the top of the first page of this letter.

When you write, include a copy of this letter, and provide your telephone number and the hours we can reach you in the spaces below.

Telephone number () _____ Hours _____

Keep a copy of this letter for your records.

Thank you for your cooperation.

Sincerely yours,

Cynthia Crowell

Cynthia J. Crowell
Department Manager, Entity

Enclosures:
Copy of this letter