

APPLICATION TO OPERATE TAXI CAB SERVICE

CITY OF CLINTON, OKLAHOMA

NAME OF APPLICANT: Elijah Carpenter

ADDRESS OF APPLICANT: 400 south 12th street Clinton Ok. 73601

NAME OF TAXI SERVICE: Classy Cabs and Limousine Services

ADDRESS USED FOR BUSINESS: same as above

OKLAHOMA TAX ID NUMBER: # 83-3346325

COLOR SCHEME/ IDENTIFYING LOGO OF THE BUSINESS: Black & white

NUMBER OF TAXI CABS IN FLEET: (Three) Toyota Camry 2014

MAKE: Cadillac MODEL: Escalade YEAR: 2010
Mercedes Benz 2005

PROVIDE VERIFICATION THAT VEHICLES ARE IN GOOD MECHANICAL CONDITION:

Documentation verified by: Cummins Chevrolet GMC, Cadillac, Jim Norton Toyota

REVIEW OF DRIVING TEST, WRITTEN AND OPERATIONAL:

Verification confirmed by: Driving License

FINGERPRINTING OF APPLICANT

Fingerprinting executed by: Anjie Schmidt

RATE SCHEDULE ATTACHED:

Verification confirmed by: _____

Pick up Flat Rate - \$3.00
Per mile, or mileage fee \$2.00
Waiting or sitting idle - \$.25
for every five minutes = \$1.00

I certify that the information provided on this form is true and complete to the best of my knowledge.

Elijah Carpenter

Applicant Signature

1-28-19

Date

Progressive
P.O. Box 94739
Cleveland, OH 44101

1-800-895-2886

Policy number: 00441606-0

Underwritten by:
Progressive Northern Insurance Co
February 26, 2019
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Certificate of Insurance

Certificate Holder

CITY OF CLINTON OKLAHOMA
415 W GARY BLVD
CLINTON, OK 73601

Insured

ELIJAH CARPENTER
CLASSY CAB AND LIMO SERVI
400 S 12TH ST
CLINTON, OK 73601

Agent

TOW&TRUCK SPECIALIST
747 ALPHA DRIVE
HIGHLAND HEIGHTS, OH 44143

This document certifies that insurance policies identified below have been issued by the designated insurer to the insured named above for the period(s) indicated. This Certificate is issued for information purposes only. It confers no rights upon the certificate holder and does not change, alter, modify, or extend the coverages afforded by the policies listed below. The coverages afforded by the policies listed below are subject to all the terms, exclusions, limitations, endorsements, and conditions of these policies.

Policy Effective Date: Feb 14, 2019

Policy Expiration Date: Feb 14, 2020

Insurance coverage(s)

Limits

Bodily Injury/Property Damage

\$1,000,000 Combined Single Limit

Description of Location/Vehicles/Special Items

Scheduled autos only

2010 CADILLAC ESCALADE 1GYUCBEF1AR155729

Medical Payments

\$5,000

Comprehensive

\$1,000 Ded

Collision

\$1,000 Ded

Roadside Assistance

Selected

Certificate number

05719A10606

Please be advised that the certificate holder will not be notified in the event of a mid-term cancellation.

