



Application for Taxicab/Limousine Company License

CASH OR CHECK ONLY!

Original Application
 Renewal License
 # _____

FEES ARE NON-REFUNDABLE

Fee Per Each Individual Vehicle (CLLTSE) \$30.00 ¹⁷
 Investigation Fee (CLLPF) \$7.00

Date Recv'd 06 / 15 / 2026
 Total \$ 517.00
 Receipt #: 10481-8

LICENSE PERIOD IS FROM
 July 1st – June 30th

Note: please allow 3 weeks for application processing

SECTION 1 – APPLICANT INFORMATION Answer all questions completely. Please PRINT clearly.

Company Name
LIR TRANSPORTATION LLC dba FOX VALLEY CAB

Business Address: **719 W FRANCES ST** City: **APPLETON** State: **WI** Zip Code: **54914**

Company Email Address [REQUIRED] _____ Company Phone Number [REQUIRED] _____

Business Owners Name: **IGOR LEYKIN** Date of Birth _____ Gender: **MALE**

Business Owner Phone Number _____ Business Owner Email Address _____

Driver's License Number _____ State Licensed: **WISCONSIN**

SECTION 2 - COMPANY HISTORY

Is the company currently licensed in any other municipality? YES NO

If Yes, what municipality? _____

Has the company ever been denied a license by any municipality? YES NO

If Yes, please explain: _____

Have any of the owners ever been convicted of a crime? YES NO

If Yes, please explain: _____

Describe the basic operations of the company:
Taxi work

If the business is located in the City limits, Municipal Code requires that off-street parking is provided for. If applicable, what provisions have been made for off street parking?
N/A

SECTION 3 – VEHICLES TO BE OPERATED - Attach additional sheets if necessary

Vehicle Number	Capacity	Make/Model	DOT License Plate #
SEE ATTACHED SHEET			

SECTION 4 – INSURANCE NOTICE

Insurance Carrier: **FIRST CHICAGO INSURANCE** Insurance Agent Name: **MCCLURE & ASSOCIATES**

Insurance Agent Phone Number _____ Insurance Agent Email Address _____

Policy Number _____ Policy Period: **4/21/26 - 4/21/27**

SECTION 5- PENALTY NOTICE

I confirm that I have the authority to sign and certify the information contained herein as the permittee/licensee, or duly authorized representative of the entity obtaining this permit/license. I have reviewed and understand the insurance requirements of the City of Appleton. I hereby certify that I, or the company I represent, have insurance in the amounts required to obtain this permit/license, have named the City of Appleton as an additional insured for purposes of this permit/license and have provided the name of my insurance carrier, the policy number, and policy period above. Further, I agree to maintain appropriate insurance coverage for the duration of this permit/license and to indemnify, defend and hold harmless the City of Appleton and its officers, officials, employees and agents from and against any and all liability, loss, damage, expenses, costs, including attorney's fees arising out of the activities performed as described herein, caused in whole or in part by any negligent act or omission of the applicant, anyone directly or indirectly employed by any of them, which may arise from the use of city right-of-way or property under this permit or license.

I certify that this application, and all information and documentation provided therein, is true and accurate.

Applicant's Signature Gregory Gussert Date: 06 / 15 / 2026

FOR OFFICE USE ONLY

Department	Approve	Deny	Date of Recommendation	Staff Member	
Risk Management	✓		06/17/2026	Brian Morgan	
Police	✓		06/26/2026	—	
Fire	✓		06/16/2026	Derek Henson	
Inspection	✓		06/17/2026	Dan Meissner	
Safety and Licensing 7/18/26					
Common Council 7/15/26					
COI on File? <input checked="" type="radio"/> YES <input type="radio"/> NO	Denial Reasoning		Date Issued	Expiration Date	License Number

Return to Office of the City Clerk: 100 N. Appleton St, Appleton WI 54911

**TAXICAB/LIMOUSINE/COMMERCIAL QUADRICYCLE
COMPANY LICENSE INFORMATION**

- Taxicab/Limousine Service Company Licenses are required within the City of Appleton when individuals are intending to operate a taxicab or limousine company. See City of Appleton Municipal code Sec. 9-721 for more information and definitions.
 - Commercial Quadricycles as defined in §340.01(8m) of the Wisconsin Statutes are to be licensed as limousines.
- The process to obtain a Taxicab/Limousine Service License takes approximately 3 weeks from the date of application until the date of issuance and requires approval from several City departments, the Safety and Licensing Committee and the Common Council.
 - When applying for a Commercial Quadricycle license, proposed route maps are required to be submitted attached to the application. These maps are then reviewed for approval by the Appleton Police Department. See City of Appleton Municipal code Sec. 9-729 for more information.
- If your company is licensed in another Wisconsin municipality you are exempt from paying a fee to the City of Appleton. A completed, signed application form along with a current Certificate of Insurance is all that is required for the company.
- Each Taxicab/Limousine Service Company License includes a single Taxicab Driver's License.

SECTION 3 – VEHICLES TO BE OPERATED - Attach additional sheets if necessary

Vehicle Number	Capacity	Make/Model	DOT License Plate #
485	7	2012 Toyota Sienna	ADDF4993
515	3	2016 Jeep Cherokee Wagon 4 door	ANP4029
517	3	2014 Hyundai Sonata	ASJ6104
521	5	2017 Chrysler Pacifica LX	ASU3855
524	5	2014 Ford Transit Connect	AUG5379
526	5	2015 Toyota Sienna	ATT6681
527	5	2015 Toyota Sienna	APPD8270
534	5	2017 Kia Sedona	AYK7780
538	5	2014 Lexus RX	AZW77124
539	3	2025 Nissan Rogue	BAC6302
541	3	2016 Nissan Infiniti	BAP4395
542	5	2025 Toyota Sienna	AYK7254
543	5	2022 Chrysler Voyager	BAS6348
544	4	2022 Chevrolet Malibu	BAS6349
546	5	2015 Kia Sedona	BAS6356
551	6	2026 Hyundai Santa Fe Hybrid	BCT1115
560	5	2026 Toyota Sienna	WG5821