



# Application for Taxicab/Limousine Company License

CASH OR CHECK ONLY!

Original Application  
 Renewal License  
 # 3-26

**FEES ARE NON-REFUNDABLE**

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

Date Recv'd 06/09/2026  
 Total \$ 97.00  
 Receipt #: 10449-6

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  
**Dynasty Limousine Service LLC**

Business Address  
**1900 Vandenberg Ln**

City  
**Kaukauna**

State  
**WI**

Zip Code  
**54130**

Company Email Address [REQUIRED]

Company Phone Number [REQUIRED]

Individual  
 Partnership  
 Corporation

Business Owners Name  
**Diana Wolters**

Date of Birth

Gender  
**Female**

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:  
**Luxury chartered transportation**

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?  
\_\_\_\_\_

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

Vehicle Number	Capacity	Make/Model	DOT License Plate #
1	5	Cadillac Escalade ESV	ADP-2679
2	5	Cadillac Escalade ESV	APA-7701
10	14	Mercedes Sprinter	DNSTY 10

## SECTION 4 - INSURANCE NOTICE

Insurance Carrier  
**Forge**

Insurance Agent Name  
**Amy Kustrich Robertson Ryan Insurance**

Insurance Agent Phone Number

Insurance Agent Email Address

Policy Number

Policy Period  
**09/07/2025-09/07/2026**

**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

*Deana K. Wetters*

Date:

*6, 1, 2026*

**FOR OFFICE USE ONLY**

Department	Approve	Deny	Date of Recommendation	Staff Member	
Risk Management	✓		<i>06/30/2026</i>	<i>Brian Morgan</i>	
Police	✓		<i>06/11/2026</i>	—	
Fire	✓		<i>06/15/2026</i>	<i>Derek Henson</i>	
Inspection	✓		<i>06/30/2026</i>	<i>Dan Meissner</i>	
Safety and Licensing <i>7/18/26</i>					
Common Council <i>7/15/26</i>					
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.