

Date May 18, 2009

**PUBLIC HEARING UPON APPLICATION  
OF OH-HO VENTURE STRATEGIES, L.L.C.,  
D/B/A FREEDOM TAXICAB, DES MOINES, IOWA  
FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY  
TO OPERATE A TAXICAB SERVICE IN THE CITY OF DES MOINES**

WHEREAS, Section 126-181 of the Municipal Code of the City of Des Moines, Iowa, forbids the operation of a taxicab as defined under the taxicab subchapter of the municipal code (Article IV of Chapter 126) as a vehicle for hire upon the streets of Des Moines without obtaining a certificate of public convenience and necessity; and

WHEREAS, Oh-Ho Venture Strategies, L.L.C., seeking to do business as Freedom Taxi, David and Heather Grabill, co-owners, 6595 NW 6<sup>th</sup> Drive, Apt. A, Des Moines, Iowa, has filed an application requesting permission of the City Council to operate a taxicab service in the City of Des Moines, with a total of six vehicles; and

WHEREAS, pursuant to Section 126-185 on May 4, 2009, by Roll Call No. 09-734, the City Council has fixed this date as the time and place for a public hearing on the matter of the application; and

WHEREAS, Section 126-186 provides if this Council finds at the conclusion of such public hearing that taxicab, or further taxicab, service in the City of Des Moines, or between any point or points in the City and elsewhere, is required by the public convenience and necessity and the applicant is fit, willing, and able to perform such public transportation and to conform to the provisions of the subchapter, then the Council shall direct the City Traffic Engineer to issue a certificate stating the name and address of the applicant, the number of vehicles authorized under said certificate and the date of issuance; otherwise the section provides the application shall be denied; and

WHEREAS, Section 126-186(a) provides that in making the findings of subsection (b) of said section, this Council shall take into consideration the number of taxicabs already in operation, whether existing transportation is adequate to meet the public need, the probable effect of increased service on local traffic conditions, and the character, experience, and responsibility of the applicant;

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Des Moines, Iowa:

That the hearing is hereby closed and the application is granted or denied, as the case may be, as set out in the next paragraph.

★ **Roll Call Number**

**Agenda Item Number**

64

**Date** May 18, 2009

\_\_\_\_\_ Alternative One: That the application for a certificate of public convenience and necessity to operate a taxicab service is approved and hereby granted and the City Traffic Engineer is directed to issue a certificate stating the name and address of the applicant, the number of vehicles authorized under the certificate and the date of issuance, it being the finding of the City Council of the City of Des Moines that such service is required by the public convenience and necessity and that the applicant, Oh-Ho Venture Strategies, L.L.C. doing business as Freedom Taxi, is fit, willing, and able to perform such public transportation and to conform to the provisions of the subchapter;

or

\_\_\_\_\_ Alternative Two: That the application for a certificate of public convenience and necessity to operate a taxicab service is hereby denied as specified below upon the specific grounds and facts set forth below.

Denial based on the following specific grounds enumerated in Sections 126-182, 126-183, 126-184, 126-186(a) and 126-187 of the Municipal Code:

\_\_\_\_\_ Number of Taxicabs already in operation under the subchapter.

\_\_\_\_\_ Adequacy of existing transportation to meet the public need.

\_\_\_\_\_ Probable detrimental effect of increased service on local traffic conditions.

\_\_\_\_\_ Character, experience, responsibility of the applicant.

\_\_\_\_\_ Likelihood operation will be conducted in conformity with subchapter.

\_\_\_\_\_ Other (specify): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

★ **Roll Call Number**

Agenda Item Number

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Date May 18, 2009

BE IT FURTHER RESOLVED that upon adoption of Alternative One (to grant the certificate), the City Traffic Engineer is hereby directed to issue a certificate to Oh-Ho Venture Strategies, L.L.C. doing business as Freedom Taxi, stating the name and address of the applicant, the number of vehicles authorized under said certificate, as set out in the application, and the date of issuance.

(Council Communication Number 09-325 Attached)

MOVED BY \_\_\_\_\_ to adopt.

APPROVED AS TO FORM:

K. Massier  
 Katharine Ramsay Massier  
 Assistant City Attorney

COUNCIL ACTION	YEAS	NAYS	PASS	ABSENT
COWNIE				
COLEMAN				
HENSLEY				
KIERNAN				
MAHAFFEY				
MEYER				
VLASSIS				
TOTAL				

MOTION CARRIED APPROVED

\_\_\_\_\_  
 Mayor

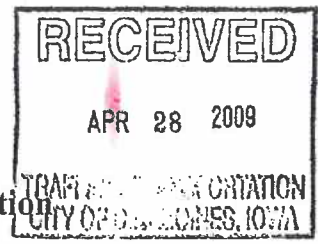
**CERTIFICATE**

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

\_\_\_\_\_  
 City Clerk

09-734  
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City of Des Moines, Iowa  
Office of  
Des Moines Police Department  
Community Outreach and Protective Services Section  
Traffic Unit

To: Gary Fox  
Traffic and Transportation

Date: 22 April 2009

From: Michael West  
Senior Police Officer  
Traffic Unit

Subject: Certificate of Public  
Necessity and  
Convenience for  
David Grabill

In accordance with the City of Des Moines Ordinance 19-49 (8) an Iowa Criminal record check and a State of Iowa driver's license record check was reviewed on David Odie Grabill, SS# [REDACTED] representing Freedom Taxi Cab.

As of April 22, 2009 Mr. Grabill's criminal record does not show any criminal activity through the Iowa System.

As of April 22, 2009 Mr. Grabill's Iowa driver's license record indicated the following activity:

Valid Iowa Driver's License

SS# [REDACTED]  
Class "B, Endorsement "L-X" and Restriction "O"  
Issues 09/06/2007  
Expires 09/01/2012  
  
Speed 04/04/2005  
Speed 08/23/2004

Based only on the past criminal record and past driver's license record of Mr. Grabill, I would recommend approval for a Certificate of Public Necessity and Convenience.

Michael West 4810

### Taxicab Company Application & Checklist

**Applicant: Oh-Ho Venture Strategies, L.L.C. – DBA FREEDOM TAXICAB**

*Taxicab or cab* means a motor vehicle regularly engaged in the business of carrying passengers for hire in a taxicab service and not operated on a fixed route and operating with a meter.  
*Taxicab driver's license* means the permission granted by the city to a person to drive a taxicab upon the streets of the city issued in the form of a metal badge.  
*Taxicab license* means the license granted annually to a person who holds a certificate to conduct a taxicab service in the city.  
*Taxicab service* means transportation of passengers in a motor vehicle from or to any point in the city, with dispatch available 24 hours a day.  
*Taximeter* means an instrument or device attached to a taxicab, which measures mechanically, electrically, or electronically the distance driven and the waiting time upon which the fare is based and converts them to monetary charges.  
*Taximeter flag* means a switch or other device which clearly indicates to passengers that the taxicab is employed and that the standard rate is being charged.  
*Trip card* means a daily record prepared by a taxicab driver of all trips made by him or her showing the time and place of origin, destination, number of passengers, and the amount of fare for each trip.

**Marked block w/ initials indicates that the applicant has provided documentation meeting or exceeding the requirements of the Municipal Code of the City of Des Moines.**

#### Sec. 126-118. Vehicle condition.

- (a) Prior to its use and operation, each vehicle shall be made to comply with all applicable requirements of the state motor vehicle code and other state and city laws. **Vehicle inspection information provided.**  
*MRB*
  
- (g) Each vehicle shall be not greater than ten (10) years old, based on the model year of production, and shall include all standard safety features in proper working order. The ten (10) year maximum age limit will not disqualify a vehicle from use as a taxicab until January 1, 2011, provided the vehicle complies with all other requirements. Does not apply – effective 1/1/2011.

#### Sec. 126-119. Designation.

- (a) Each taxicab shall bear on the outside of a door on each side the name of the holder; and, in addition, may bear an identifying design. The markings shall be painted or affixed by decal in letters or figures at least two inches in height. Any licensed vehicle shall not have a color scheme, identifying design, monogram, or insignia that will conflict with or imitate any existing taxicab or any official or
- MRB*

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emergency vehicle color scheme, in a manner that will mislead or deceive or defraud the public. **Photo information provided.**

MRB

(b) Each taxicab shall bear on the inside of the passenger compartment clearly visible to passengers a sign which denotes the name of the holder and the number used by the holder to designate the vehicle. **Information provided.**

MRB

**Sec. 126-120. Taximeters.**

Each taxicab operated under the authority of this article shall be equipped with a taximeter fastened in front of the passengers, visible to them at all times of the day and night, and, after sundown, the face of the taximeter shall be illuminated. The taximeter shall be operated mechanically, electrically or electronically, and shall be sealed at all points and connections which, if manipulated, would affect their correct reading and recording. Each taximeter shall have a flag to denote when the vehicle is employed and when it is not employed. The driver shall throw the taximeter flag into a recording position at the beginning of each trip and into a non-recording position at the end of each trip. Taximeters shall be subject to inspection from time to time by the police department. Any inspector or other department officer is hereby authorized, either upon complaint of any person or without such complaint, to inspect any meter, and upon discovery of an inaccuracy therein of over five percent to the prejudice of any passenger, to notify the person operating said taxicab to cease operation. The taxicab shall then be kept out of service until the taximeter is repaired, or replaced with another properly functioning meter. **Information provided.**

MRB

**Sec. 126-123. Posting of rates.**

Every taximeter shall be connected to the taxicab so that the amount of fare shall be plainly visible to all passengers or occupants. Every vehicle shall carry a rate card, posted in a conspicuous place on the inside of the vehicle. **Information provided.**

**Sec. 126-149. Service.**

(a) Any person engaged in the taxicab business in the city shall render an overall service to the public desiring to use taxicabs. **Business Requirement ←.**

MRB

(b) The holder of a certificate shall maintain a place of business in a location properly zoned for that business. – **VERIFIED with POLK CO PUBLIC WORKS**

MRB

(c) The holder shall have a listed telephone number for receiving calls for service. **Page 738, DEX Directory – verified 2-11-09**

MRB

(d) The dispatching of taxicabs shall be accomplished by the holder of the certificate using any method which accurately records and retains detailed information

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about each call for service and each trip, including but not limited to: time of call for service; time the trip was dispatched; address of the origin and destination of the trip; and time the trip was started (taximeter activated) and ended. **Information provided.**

(e) The holder shall answer all calls received for services inside the corporate limits of the city as soon as they can do so. If their services cannot be rendered within a reasonable time, they shall notify the prospective passengers how long it will be before the call can be answered and give the reason therefor. **Business Requirement ←.**

MRB

(f) The holder shall provide a minimum of six qualified drivers. **Information provided.**

MRB

(g) The holder shall provide a minimum of five qualified vehicles, with a minimum of four vehicles available to respond into operation at all times. **Information provided.**

(h) Any holder who shall refuse to accept a call anywhere in the corporate limits of the city at any time when the holder has available cabs or who shall fail or refuse to give overall service, shall be deemed a violator of this article and the certificate granted to such holder may be revoked at the discretion of the city council. **Business Requirement ←.**

**Sec. 126-150. Reports and records.**

MRB

(a) Each driver shall maintain a daily trip card. All complete trip cards shall be returned to the holder by the driver at the conclusion of his or her tour of duty. The forms for each trip card shall be furnished to the driver by the holder and shall be approved by the chief of police. **Information provided – Approved by authorized representative of Chief of Police.**

(b) Each holder shall submit to the traffic engineer a report by January 30 of each year summarizing the activity of the previous year. The report shall contain general information on number and types of complaints received including information on any discrimination complaints; number of trips per vehicle; age, mileage and general condition of each vehicle; tenure and turnover of drivers; periodic normal response time and other information as required by the traffic engineer. **Annual (year-end) Requirement. Does not apply for a new application process.**

(c) Each holder of a certificate shall retain and preserve all trip cards in a safe place for at least one month following the date of making the record. Trip cards

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shall be available to the chief of police and the traffic engineer. **Business Requirement ←.**

**Sec. 126-181. Certificate of public convenience and necessity required.**

Any person owning, operating or controlling a taxicab as a vehicle for hire upon the streets of the city or picking up any passenger for a fare within the corporate limits of the city, shall first obtain certificate and the required annual license from the traffic engineer. **Application Process / Licensing.**

Type  
  
MRB

(1) Contract drivers. A certificate may also be granted to an applicant or renewed to an existing holder of a certificate, who proposes to furnish taxicab service at least in part through drivers who are duly licensed by the city, who are bound by written agreement with the certificate holder to furnish taxicab services of the quality provided for in this article, and who either own or are lessees of licensed taxicabs. Such agreement shall incorporate the provisions of this article applicable to such driver. Certificate holders bound by said written agreements shall have available a report, on or before the fifth day of each month, stating the names and addresses of all drivers who operated taxicabs during the preceding month. **Business Requirement ←.**

(2) **Unincorporated association.** A certificate may also be granted to an applicant, or renewed to an existing holder of a certificate, consisting of an association of taxicab owners who propose to furnish taxicab service as an operating group to meet all obligations of this article for a holder of a certificate. **Not applicable.**

(3) Any holder of a certificate operating under the above plans shall be treated as an owner in applying sections 126-119, 126-122, 126-150 and 126-187 of this article. **Business Requirement ←.**

(4) Nothing herein shall change the holder's obligation to furnish to the city the insurance coverage's provided for in section 126-187 of this division or change the license fees provided for in section 126-188 of this division. **Business Requirement ←.**

MRB

(5) Exemptions. The following motor vehicles are excluded from the requirements of this article:

a. Motor vehicles owned and operated by hotels, motels and other boarding places, used for the purpose of transporting patrons, without fee or charge, between said hotel, motel or boarding place and the local station of a common carrier.

b. Ambulances and other emergency vehicles.

c. Funeral hearses.



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d. Metropolitan Transit Authority buses or other motor buses duly licensed by the state.

→ **LICENSE REQUIREMENT NOT EXEMPTED BY THIS REQUIREMENT** ←.

**Sec. 126-182. Requirements for taxicab service.**

Any person, including an association, filing an application for a taxicab certificate shall meet the following minimum requirements:



(1) Provide an office in a location properly zoned for that business which must be available for inspection upon request of the city manager. If vehicle maintenance and storage is provided separately from the office, then the vehicle maintenance/storage area must also be in a location properly zoned for such activity. **Requirement Met.**



(2) Provide taxicab service to the public 24 hours a day, seven days a week and have a telephone that is answered 24 hours a day, seven days a week so that any individual may request the services of the certificate holder. The business shall have a listed telephone number. **Business Requirement ←. Phone number requirement met.**



(3) Provide a minimum of six qualified taxicab drivers. **List of Six QUALIFIED Drivers Provided.**



(4) Provide a minimum of five qualified taxicab vehicles with a minimum of four vehicles available to respond into operation at all times. **List of SIX QUALIFIED VEHICLES Provided.**



(5) Meet all applicable zoning ordinance regulations. **Verified by Polk County Public Works.**

**Sec. 126-183. Application for certificate of public convenience and necessity.**

Any person seeking a certificate shall file an application with the traffic engineer. The application shall be signed by the applicant, by an officer of the applicant or, in the case of an unincorporated association, by all taxicab owners in the association, and verified under oath and shall contain the following information:



(1) The name, address and age of the applicant. If the applicant is a corporation, its name, the address of its principal place of business, and the name and address of its registered agent. If the applicant is a partnership, its name, the names of general and limited partners and the address of its principal place of business. If the applicant is an association, its name, the names and addresses of all taxicab

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owners in the association, the address of its principal place of business, and the name of a member authorized by the association to receive and accept all correspondence and notices from the city pertaining to the association, its members and its drivers. If the place of business is outside the corporate limits of the city, the applicant shall provide a statement from the governing jurisdiction that the business complies with the appropriate zoning regulations. **PROVIDED.**

MRB

(2) The financial status of the applicant, including the amounts of all unpaid judgments against the applicant and the nature of the transaction or acts giving rise to these judgments. If the applicant is a firm, partnership, corporation or any other type of business entity, including an association, which has been organized for less than five years prior to the date of application, this information shall be provided for each of the shareholders, partners, officers, or other investors of the business entity. **PROVIDED.**

MRB

(3) The experience of the applicant in the transportation of passengers including a statement of any state or municipality where the applicant has ever been licensed to operate a taxicab, or limousine service whether such license was ever suspended or revoked and the reasons for suspension or revocation, and whether an application for a license or a renewal of a license was denied and the reasons for denial. If the applicant is an association, this information shall be stated as to each member of the association. **PROVIDED.**

MRB

(4) Any facts which the applicant believes tend to prove that public convenience and necessity require the granting of a certificate. **PROVIDED.**

MRB

(5) The number of vehicles to be operated or controlled by the applicant. A statement of the condition of the vehicles to be operated, including the model year and type of each vehicle and the date on which the vehicle passed its most recent safety inspection, if any. **PROVIDED.**

MRB

(6) The location of proposed depots and terminals. **PROVIDED.**

MRB

(7) A statement as to whether the applicant has ever been convicted of, pled guilty to or stipulated to the facts of a violation of a criminal statute or ordinance, traffic law or municipal ordinance. If the applicant has been convicted, found guilty of or stipulated to a charge a statement as to the date and place of disposition, the nature of the offense and the punishment imposed. In addition, the applicant shall provide a current criminal history report from each state of residence, and a certified copy of their driving record, for the five years preceding the date of application. If the applicant is an association, the above statements shall be made, and criminal history report and certified copy of driving record provided, as to each member of the association. **PROVIDED.**

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MRB

(8) The number of vehicles proposed for operation during periods of maximum demand and during periods of least demand. **PROVIDED.**

MRB

(9) Where the applicant will operate its dispatch service. **PROVIDED.**

MRB

(10) The color scheme or insignia to be used to designate the vehicles of the applicant. **PROVIDED.**

**Sec. 126-184. Investigation of applicant for certificate of public convenience and necessity.**

for  
enclosure

The police department shall review each applicant's arrest and traffic records and report the results of the investigation to the city council. Where the applicant is a corporation, the corporate officers' records shall be investigated; where a partnership, each partner's records shall be investigated; where an association, each association member's records shall be investigated. **REPORT TO BE FURNISHED BY DSM Police Department**

**Sec. 126-187. Liability insurance.**

MRB

(a) A certificate shall not be issued or continued in effect unless and until the owner of the taxicab business furnishes to the traffic engineer an insurance policy or policies, or certificate of insurance, issued by an insurance company having an A.M. Best rating of no less than B+. The policy(ies) shall include commercial general liability insurance coverage and automobile liability insurance coverage, or the equivalent thereof, for the taxicab business and independent contractors of the taxicab business. The commercial general liability insurance shall include coverage for bodily injury, death and property damage with limits of liability of not less than \$750,000.00 per occurrence and aggregate combined single limit. The automobile liability insurance shall include coverage for bodily injury, death and property damage with limits of liability of not less than \$750,000.00 per occurrence combined single limit. **PROVIDED.**

MRB

(b) The certificate of insurance referred to in this section shall provide that the insurance policy or policies have been endorsed to provide 30 days advance written notice of cancellation, 45 days advance written notice of non-renewal, and ten days advance written notice of cancellation due to nonpayment of premium, and that these written notices shall be provided by registered mail to the traffic engineer. **PROVIDED.**

MRB

(c) The cancellation or other termination of any required insurance policy shall automatically revoke and terminate the certificate and all licenses issued for the taxicab business, independent contractors and the vehicles covered by such

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8 | **Taxicab Company Application Checklist – City of Des Moines**

insurance policy(ies), unless another policy(ies), complying with this section, shall be provided and in effect at the time of such cancellation or termination. The traffic engineer shall immediately issue written notification of the revocation of said certificate and all licenses for the taxicab business, independent contractors and the vehicles covered by such insurance which is cancelled or terminated and shall file a copy of such notice with the city council. **PROVIDED.**

Reviewed as noted above by:

*Michael R. Berry 4-20-09*  
Michael R. Berry  
Traffic Facilities Administrator

**Traffic and  
Transportation**

APR 21 2009

*Content* **APPROVED as noted**  
**City of Des Moines**  
*Michael R. Berry*

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APPLICATION FOR CERTIFICATE OF  
PUBLIC CONVENIENCE  
AND NECESSITY

Oh-Ho Venture Strategies, L.L.C.

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**Des Moines Municipal Code Section 126-183(5):**

**Statement of the number of vehicles operated by applicant, their condition, model year and type and date of last safety inspection if any –**

All vehicles are inspected at Freedom Tire, in Ankeny, every ten (10) days at which time the oil is changed and the vehicles are given a safety check.

All vehicles are in good or excellent condition.

For a listing of vehicles, model and type, see Exhibit E.

*Enclosed*

*Sec. 126-118  
(a)*

*Sec. 126-183 (5)*

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**FREEDOM TAXICAB FLEET INFORMATION**

Cab #004: 1998 Chevy Lumina – VIN 2G1WL52M6W9290895

Cab #006: 2001 Chevy Venture – VIN 1GNDX03E31D290241

Cab #007: 1999 Chevy Venture – VIN 1GNDU03E6XD194170

Cab #008: 1996 Chevy Lumina – VIN 2G1WL52M6T1126055

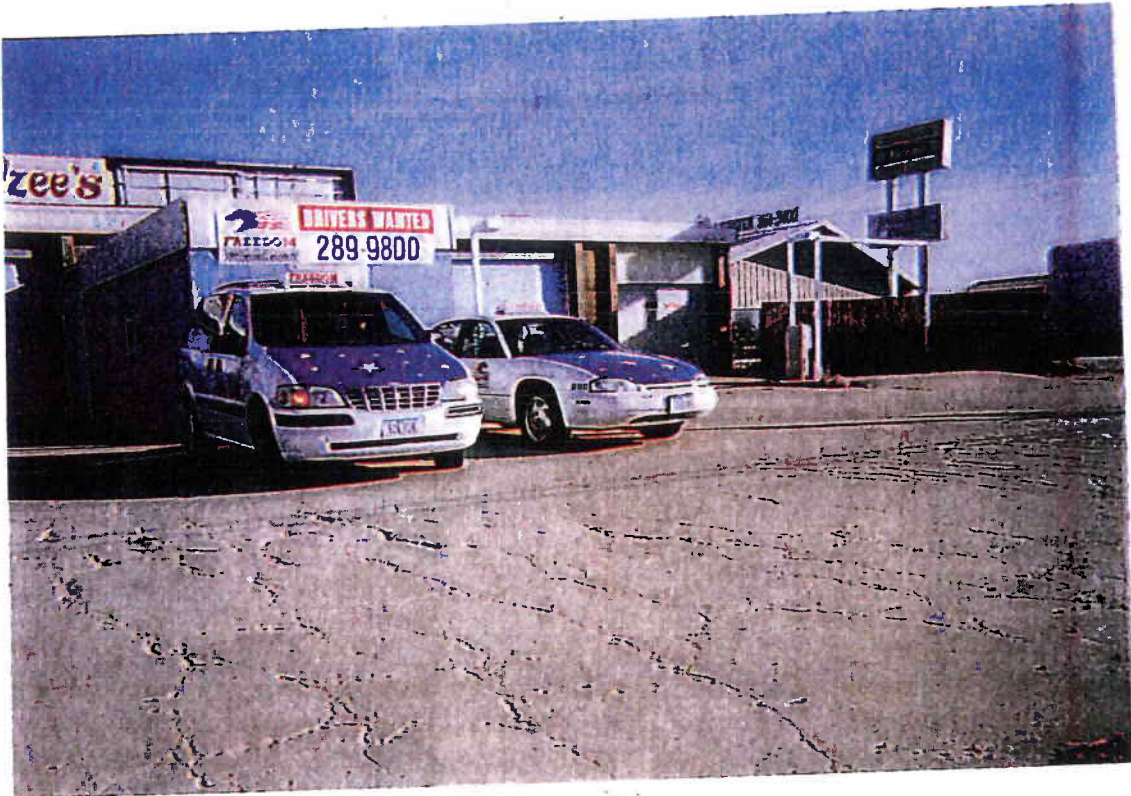
Cab #009: 1999 Chevy Venture – VIN 1GNDX03E1XD290005

Cab #010: 1999 Chevy Venture – VIN 1GNDX03E8XD137878

Sec 126-118 (g)  
Sec 126-103 (s)

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Sec. 126-183 (10)



*[Handwritten scribbles]*





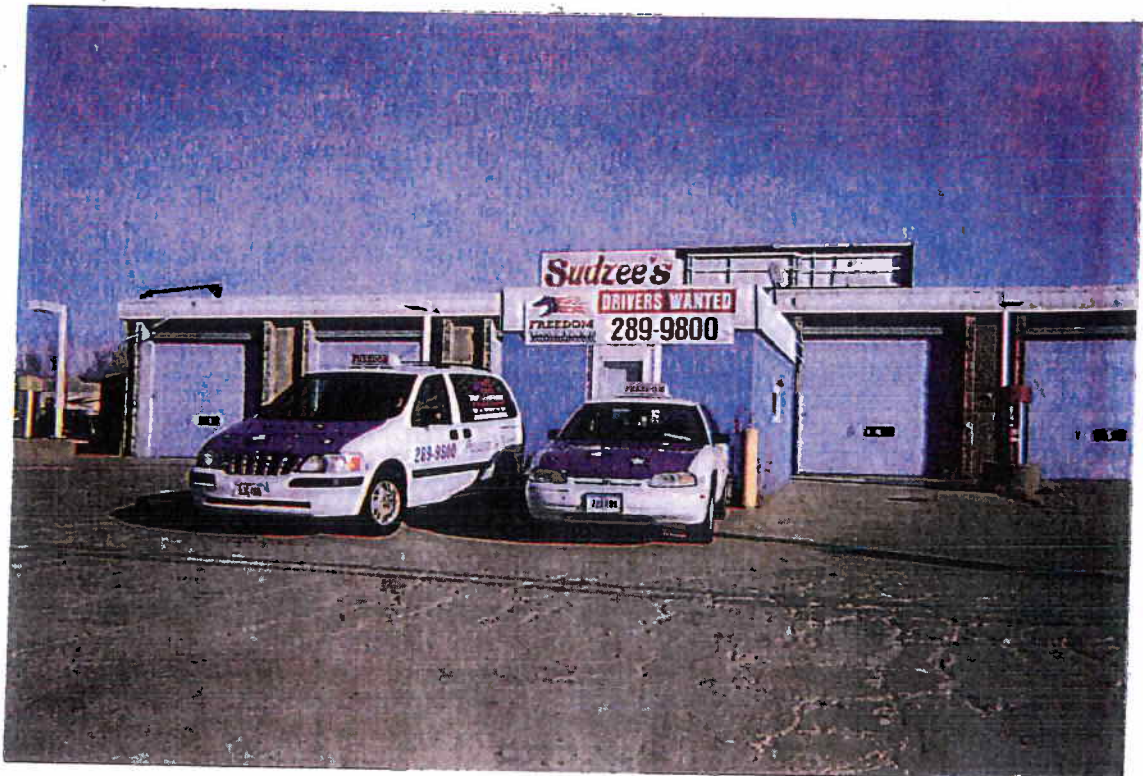
Sec. 126-183(10)

09-734 28

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to the person in the photograph  
on



Car Seats Required for Children under 6

*Thank you  
for Choosing*

**FREEDOM  
TAXICAB**

This vehicle identified as

Unit # 004

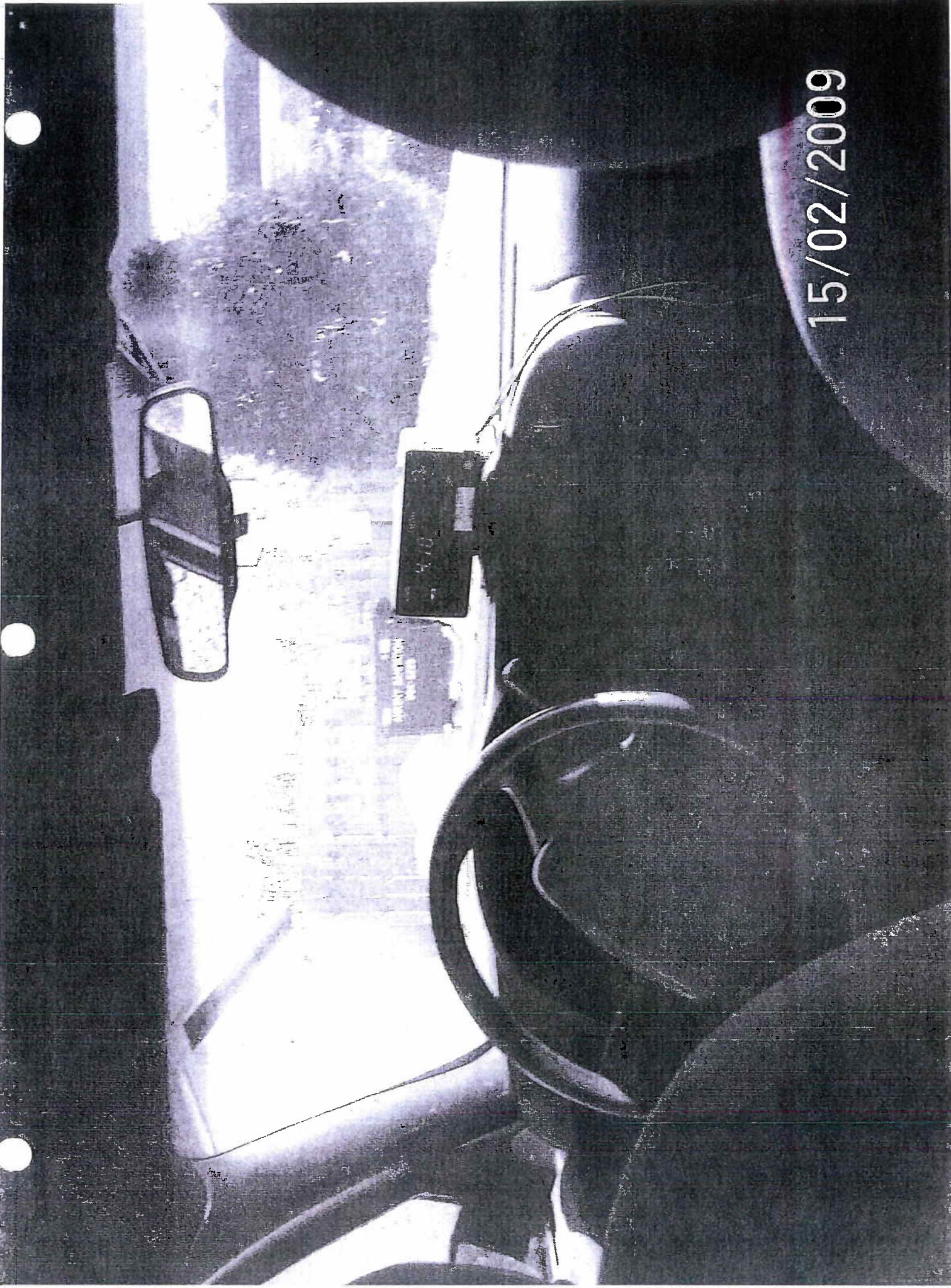
owned by

OH-HO Venture Strategies **10603/2009**

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09-134 2564

15/02/2009



# Freedom Taxicab Rates

Fare: First one-tenth mile \$2.50

Each additional one-tenth mile .20

Night Surcharge (10pm-4am) \$2.00

Additional Passengers  
(over 12) (entire trip) .50

Each minute waiting time  
(equivalent of \$24 or  
cab moving at 12 mph) .40

09-734 2B  
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115/02/2009

**FREEDOM  
CAB**  
**Co. Rate**  
**Posted Location**



**NO FOOD**  
**NO DRINK**  
**NO SMOKING**  
**NO CHECKS**

Freedom Cab  
Rate

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January 22, 2009

Heather and Odie Grabill have owned and operated Freedom Taxicab/Cabmobile.com for the last 5 years. Freedom Taxicab/Cabmobile.com was established in April of 2004, securing significant business and several commercial accounts in Ankeny, Iowa. The name is becoming increasingly recognized in the suburbs and the company frequently serves a call volume of up to 100 calls every 24 hours. Freedom Taxicab currently refuses an average of 15 calls each day from would be customers in the city of Des Moines. The intention is to legally expand service to these customers, who historically have had no genuine choice. Our mission "To Simply Offer A Safe and Trusted Choice in Our Industry!!"

Sec. 126-1A9 (a)  
Sec. 126-183 (4)

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**COUNTY OF POLK**  
**Public Works Department**

Larry Land, Director Polk  
County Public Works  
5885 NE 14 Street  
Des Moines, Iowa 50313  
Ph 515.286.3705  
Fax 515.286.3437  
Email: publicwrks@co.polk.ia.us  
[www.co.polk.ia.us](http://www.co.polk.ia.us)

February 4, 2009

Nicholas A. Sarcone  
Block, Lamberti & Gocke, P.C.  
210 NE Delaware Avenue, Suite #200  
Ankeny, Iowa

Re: Zoning letter for Freedom TaxiCab located at 6595 NW 6<sup>th</sup> Drive

Dear Mr. Sarcone :

The property located at 6595 NW 6<sup>th</sup> Drive is located in unincorporated Polk County and is subject to the Polk County Zoning Ordinance. Freedom TaxiCab is operating from this property and is seeking approval from the City of Des Moines to operate the business within the City of Des Moines.

The Polk County 2030 Comprehensive Plan was adopted May 9, 2006 and the Polk County Zoning Ordinance and Map were amended and went into affect on September 10, 2007. The Polk County 2030 Comprehensive Plan and Polk County Zoning Map identify the subject property and other adjacent properties as Neighborhood Commercial Classification and Neighborhood Business District respectively. A taxi service business is considered Local and Interurban Passenger Transit use, a Light Industry uses in the current Zoning Ordinance. However, the use was permitted under the previous Polk County ordinance and zoning map. The taxi cab business is considered a legal, nonconforming use and it may continue on the property.

If you have further questions regarding this response, you may contact Charles Wong, Polk County Planning Division at 286-3355.

Sincerely,

Bret Van der Lune  
Land Use Planning Manager

126-149(b)

cc: Larry Land, Director Polk County Public Works

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**Tax Return Preparation (Cont'd)**

**Jackson Hewitt Tax Service**  
1001 73rd St Windsor Hts — 255-4445  
**Jackson Hewitt Tax Service**  
1301 E Euclid Ave — 299-5500  
**Jones Carroll M Co CPA**  
2220 Woodlands Pkwy Clve — 226-9422  
**Kane Company PC CPA's**  
5526 NW 86th St Sle A — 270-2727

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**Liberty Tax** 5709 Hickman Rd — 274-9741  
**Liberty Tax Service** — 866 871-1040  
*Please See Ad on Previous Page*

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**Lincicum & Associates PC**  
2525 N Ankeny Blvd Ste 117 Ankeny — 964-2225  
**Martens & Company CPA LLP**  
4949 Pleasant St Suite 104 WDM — 223-4841

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**Meriwether Wilson & Co PLC**  
4500 Westown Pkwy WDM — 223-0002  
**Michael M Lydon CPA PC**  
2785 Ankeny Blvd Ste 24 Ankeny — 964-8878  
**MIDWEST FINANCIAL CONSULTANTS**  
1903 46th St — 277-4778  
**MR TAX OF AMERICA INC**  
1100 Grand Ave WDM — 225-1185

*Please See Advertisement Page 736*

**Mote CPA** 2011 Beaver Ave — 271-8183  
**Ms Tax USA** 4730 SW 9th St — 974-0455  
**MULLINS HERBERT J CPA**  
Auditing & Tax Consulting  
3500 2nd Ave — 282-4735

**MULLINS THEODORE J CPA**  
Auditing & Tax Consulting  
3500 2nd Ave — 282-4735

**PLANNERS TAX & ACCOUNTING THE**  
1012 Grand Ave WDM — 224-0149  
<http://www.plannersgroup.com>

**POLLARD AND COMPANY PC**  
5650 NW Johnson Dr Johnston — 251-8520  
**PREMIER TAX SERVICE** — 244-2555

**RECKS THOMAS J INC**

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**RHODES SCOTT PC CPA**  
2900 Westown Pkwy WDM — 244-9606  
**Rhodes Scott PC CPA**  
2900 Westown Pkwy WDM — 244-9606

**Ryun Givens & Co PLC**  
2900 100th St Ste 301 Urbandl — 225-3141  
**Schnoes & Dahm PC** 544 4th St WDM — 274-9696

**Short & Company CPA PLC**  
225 NE Dartmoor Dr Ste 100 Wkee — 987-8916  
911 Main St Adl — 993-4640

**Sisson Travis M PC**  
5700 University Ave WDM — 453-8502

**SSC Services Inc**  
2190 NW 82nd St Suite 4 Clve — 274-4730  
[taxprep@sscservices.com](mailto:taxprep@sscservices.com)

**STEVE R SMITH TAX & ACCOUNTING SERVICE**

• TAX PREPARATION  
• MULTIPLE YEARS FILING  
• MONTHLY ACCOUNTING FOR SMALL BUSINESS  
Need Help With Quickbooks? Call Me!  
2053 E Grand Av Des Moines — 515-265-8369

**Strawhacker & Associates LLC**  
4601 Westown Pkwy WDM — 223-7370

**THE ORIGINAL TAX DOCTOR**  
2611 Ingersol — 883-1955

*Please See Advertisement Page 736*

**Thomas J Reicks Inc** — 243-6884

**Timmins Kroll & Jacobsen LLP**  
10550 New York Av Urbandl — 270-8080

**TUNINK MURRAY FINANCIAL GROUP**



Tax return preparation and planning  
Electronic filing

Experienced tax professionals  
Retirement income planning

[www.tuninkmurray.com](http://www.tuninkmurray.com)

1011 Office Park Rd Ste 8 W Des Moines — 223-1255

**Tunink Murray Financial Group**  
1011 Office Park Rd Ste 8 WDM — 223-1255  
[www.tuninkmurray.com](http://www.tuninkmurray.com)

**Tunink Murray Financial Group**  
1011 Office Park Rd WDM — 223-1255

**Tax Return Transmission-Electronic**

**MR TAX OF AMERICA**  
1100 Grand Ave WDM — 225-1185  
**Quick Tax Services** 1163 24th St — 255-1040

**Taxes-Consultants & Representatives**

**H&R Block** 2324 University Ave — 369-2540  
**Management Control Tax Services Inc**  
3106 SW 9th St — 244-3504  
**Wall & Associates Inc** — 255-3138

**Taxicabs & Other Transportation**

**Yellow Cab Co.**  
Dependable, Affordable, Safe  
243-1111  
24 Hour Service Statewide SINCE 1930  
[www.transiowa.com](http://www.transiowa.com)

**Alpha Taxi** — 280-1813  
**Budget Taxi Cab** — 223-6465  
**CAPITOL CAB CO** — 982-8111  
**Freedom Taxi Cab**  
6595 NW 6th Dr Svr Twp — 289-9800

**Gene's Transportation & Delivery**  
No Service After MidNight — 249-1127

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Quick Dispatch & Reservations  
From West & East Suburbs  
Airport & Group Shuttle  
**515-266-5466**  
Major Credit Cards Accepted  
Discounts For Business, Groups  
& Frequent Rider Program  
Operated By UST Services, LLC

**YELLOW CAB CO** — 243-1111

*Please See Advertisement This Page.*

**Taxidermists & Supplies**

**Adams Rick Taxidermist** 11423 Elk Horn St - 961-0030  
**BRAD COULSON TAXIDERMIST**  
1517 NE 70th Ave Ankeny — 289-2789

**Howard Taxidermy Studio**  
201 SW Shamin Dr Ankeny — 964-3577

**JOE MEDER/KODIAK LTD**  
2737 Lake View Dr NE Solon — 319 644-2261

With Dex you never have to worry that you missed something important - our Yellow Pages are complete and comprehensive. The Dex Yellow Pages is your guide to making smart decisions by providing you with the most complete information about all the business and stores in your area.

**Laird's Taxidermy Studio** — 996-2760  
**Lindstrom's Taxidermy** 3903 11th Pl — 243-8920

**NON-TYPICAL TAXIDERMY**

**FISH REPLICAS • FISH • DEER • MAMMALS  
BIRDS • FULL BODY MOUNTS**  
Proud Sponsor Of Mid Iowa Archers  
Bill Wilson Taxidermist  
109 SE Olanda Des Moines — 515 205-0912

**Scovel Taxidermy** 8522 Pershing St Indnl — 962-1341  
**Wildlife Illusions** 5375 72nd St Urbandl — 251-8397

**Tea**

**Golden Tea Pot** 2520 Vine St WDM — 327-1818  
**Gong Fu Tea** 414 E 6th St — 288-3388  
**Tea And Other Comforts** — 279-1215

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**Fuzzy Monkey Instructional Design**  
7 SW 56th St — 309-6143

**Teddy Bears**

**Friendsville** 1551 Valley West Dr WDM — 223-0050

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**Recycle.**  
**It's what to do when you finish a good book.**

DEX

2-11-09



25  
64

**Des Moines Municipal Code Section 126-183(9):**

**Where the applicant will operate its dispatch service –**

Dispatch will be located at the 6595 NW 6<sup>th</sup> Dr., Des Moines, IA 50313. *Sec. 126-183(9)*

Dispatch services are currently located in this location.

The 24 hour phone number is (515) 289-9800. *126-149(c)*

[www.cabmobile.com](http://www.cabmobile.com)

25  
64

Sec. 126-150 (c)  
Sec. 126-149 (c)

Berry, Mike R.

**From:** Nick Sarcone [Nick.sarcone@ankenylaw.com]  
**Sent:** Monday, March 09, 2009 4:18 PM  
**To:** Berry, Mike R.  
**Subject:** RE: Freedom Taxicab Application

Mike -

I dropped off some information for our application today. I gave you the meter instructions manual, and the cell phone instruction manual which serves as the dispatch. **There is a computer that logs all the calls and dispatches.** Records are printed and kept in a filing cabinet for at least 6 months I believe. There are pictures of the inside of the vehicle and the cell phone used for dispatch. There is a picture of the rate card on the vehicle, I also have one that I forgot to drop off if you need it. I think the other things are self-explanatory. Please let me know if you need anything else.

Nicholas A. Sarcone  
Block, Lamberti & Gocke, P.C.  
210 N.E. Delaware Avenue, Suite #200  
Ankeny, Iowa 50021  
(515) 964-8777 Phone  
(515) 964-8796 Fax  
[nick.sarcone@ankenylaw.com](mailto:nick.sarcone@ankenylaw.com)  
[www.blocklambertigocke.com](http://www.blocklambertigocke.com)

-----Original Message-----

**From:** Mike Berry [mailto:mrberry@dmgov.org]  
**Sent:** Thursday, February 12, 2009 10:53 AM  
**To:** Nick Sarcone  
**Cc:** Mike Berry  
**Subject:** Freedom Taxicab Application

This E-mail was sent from "RNPBA2248" (MP C3500/LD435c).

Scan Date: 02.12.2009 10:38:07 (-0500)  
Queries to: [LanierMFC@dmgov.org](mailto:LanierMFC@dmgov.org)

09-13-15  
64

**Des Moines Municipal Code Section 126-183(8):**

**The number of vehicles proposed for operation during periods of maximum demand and during periods of least demand –**

Freedom Taxicab intends on operating 4 taxicabs 24 hours per day and during periods of maximum demand up to 6 taxicabs.

See Sec 126-149 (9)  
Provide a min. of  
5 qualified vehicles  
w/ Min. of 4 available  
at all times  
Sec. 126-183 (8)

25  
64

**Berry, Mike R.**

---

**From:** Kingery, Anna L.  
**Sent:** Wednesday, March 25, 2009 1:21 PM  
**To:** Berry, Mike R.  
**Cc:** Bradshaw, Judy A.; Singleton, Richard L.; Fox, Gary L.; Kingery, Anna L.  
**Subject:** Daily Trip Reports for Freedom Taxicab Company

On March 23, 2009 you provided a Daily Trip Card submitted by Freedom Taxicab Company for my review.

This log will meet the requirements of the Police Department and will provide us with the information required by the Code.

Judy A. Bradshaw  
Chief of Police



25  
64

**Des Moines Municipal Code Section 126-183(1):**

**Name and address of applicant –**

Oh-Ho Venture Strategies, L.L.C. d/b/a Freedom Taxicab / Cabmobile.com

**Principal Place of Business –**

6595 NW 6<sup>th</sup> Dr., Des Moines, IA 50313

**Name and address of Registered Agent –**

David Grabill 6595 NW 6<sup>th</sup> Dr., Des Moines, IA 50313

**Statement from Polk County that Oh-Ho Venture Strategies, L.L.C. is in compliance with all zoning laws –**

See Exhibit A. ~~Packet~~. MRB

All other supporting documents found in Exhibit A.

~~Packet~~. MRB

09-734  
25  
64

**Des Moines Municipal Code Section 126-183(3):**

**Experience of the applicant including a statement from the City of Ankeny regarding any suspensions, revocations, or renewal denials of any license and reasons therefore –**

Applicant has run a taxi cab company in the City of Ankeny for five years.

Applicant has never had its taxi license suspended, revoked, or denied.  
See letter, Exhibit C.

David Grabill has eight (8) years of experience as a taxicab driver. He is currently licensed by the City of Des Moines and the City of Ankeny. Mr. Grabill is the owner of the Applicant and drives a cab for Applicant as well. Prior to the organization of the Applicant, Mr. Grabill drove a cab for the Capital Cab Company in Des Moines.

Heather Grabill has eight (8) years of experience as a taxicab driver. She is currently licensed by the City of Des Moines and the City of Ankeny. In addition to being an owner of the Applicant, she currently operates a taxicab for the Applicant.

126-183(3)

25  
64



February 3, 2009

RE: Freedom Taxicab

To Whom It May Concern:

Freedom Taxicab has never been denied a taxicab municipal license with the City of Ankeny, nor has the City of Ankeny ever suspended or revoked their taxicab municipal license.

Sincerely,

A handwritten signature in cursive script that reads "Pamela DeMouth".

Pamela DeMouth  
City Clerk  
City of Ankeny

Sec 126-183(3)



25  
64

**Des Moines Municipal Code Section 126-183(6):**

**Location of proposed depots and terminals –**  
6595 NW 6<sup>th</sup> Dr., Des Moines, IA 50313

Sec 126-183(6)

25

11:51 AM  
02/19/09

# OH-HO VENTURE STRATEGIES LLC Employee Contact List

Employee	SS No.	Phone	Address	Gender
Adam J Cooper	[REDACTED]	[REDACTED]	[REDACTED] Des Moines, IA 50317	Male
Danny H Nelson	[REDACTED]	[REDACTED]	[REDACTED] Ankeny, IA 50021	Male
David O Grabill	[REDACTED]	[REDACTED]	[REDACTED] Des Moines, IA 50313	Male
Gail E Scoggins	[REDACTED]	[REDACTED]	[REDACTED] Des Moines, IA 50316	Male
Heather M Grabill	[REDACTED]	[REDACTED]	[REDACTED] Des Moines, IA 50313	Female
John J Krupa Jr	[REDACTED]	[REDACTED]	[REDACTED] Ankeny, IA 50023	Male
Michael W Newton	[REDACTED]	[REDACTED]	[REDACTED] Ankeny, IA 50021	Male

*Intentionally  
Removed  
City of DSM  
MAB*

*Newton  
Not Licensed  
3-10-09  
AS OF  
MAB*

09-734  
28  
64

**Des Moines Municipal Code Section 126-183(7):**

**Certified driving record and criminal history check –**  
See Exhibit F.

**Statement of as to date, location, and nature of any convictions –**

**Speeding:**

Both David and Heather Grabill, co-owners of Oh-Ho Venture Startegies, L.L.C. have been convicted of speeding on a few occassions as evidenced by their driving record. The exact situations and facts surrounding each speeding ticket are unclear however punishment resulted only in the scheduled fines.

Sec 126-183(7)



State of Iowa  
 Division of Criminal Investigation  
 215 E 7<sup>th</sup> St  
 Des Moines IA 50319  
 Ph. 515-725-6066 Fax 515-725-6080



25  
64

Iowa Criminal History Record Check  
 Walk-In Request

Your name	David Otis Grabill
Address	6595 NW 6th Dr.
City/State/Zip	Des Moines IA, 50313
Phone#	515) 718-1820

Fill in all shaded areas.

Requesting an Iowa criminal history record check on:

<b>Last Name</b> <i>Apellido</i> (mandatory)	<b>First Name</b> <i>Primer Nombre</i> (mandatory)	<b>Middle Name</b> <i>Segundo Nombre</i> (recommended)
Grabill	David	Otis
<b>Date of Birth</b> <i>Fecha Nacimiento</i> (mandatory)	<b>Gender</b> <i>Genero</i> (mandatory)	<b>Social Security Number</b> (recommended)
Removed - MEB City of DSM	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Removed - MEB City of DSM

yourself, please sign. If the request is on someone else

*David Otis Grabill*

**Results**

As of 1-13-09, a name and date of birth check revealed:

No record found

Record attached, DCI # \_\_\_\_\_

DCI initials bdk

STATE OF IOWA  
 D.P.S.  
 DIV. OF CRIMINAL  
 INVESTIGATION  
 DCI ONLY  
 2009 JAN 13 PM 12:52

**Receipt**

Number of requests 1 x \$10.00 per last name = Total amount \$ 10.00

Method of payment:  cash  money order  check # \_\_\_\_\_  MasterCard or Visa

Cardholder's name \_\_\_\_\_ Last 4 digits of MC or Visa \_\_\_\_\_

DCI initials bdk

Credit Card Number # \_\_\_\_\_ Exp. Date \_\_\_\_\_



# Iowa Department of Transportation

Office of Driver Services  
PO Box 9204, Des Moines, IA 50306-9204

(Toll Free) 800-532-1121  
515-244-9124  
FAX: 515-239-1837

25  
04

## Certified Abstract of Driving Record

<b>Inquiry Date:</b>	1/13/2009	<b>DL/ID #:</b>		<b>Customer #:</b>	923271
<b>Name:</b>	Grabill, David Odie	<b>Class:</b>	B	<b>ID Status:</b>	None
<b>Address:</b>	6595 NW 6TH Drive Apt A	<b>Audit #:</b>	1482551	<b>DL Status:</b>	VAL
<b>City/State:</b>	Des Moines, IA 50313	<b>Issue Date:</b>	09/06/2007	<b>CDL Status:</b>	VAL
<b>Mailing Address:</b>	6595 NW 6TH Drive Apt A	<b>Expiration Date:</b>	09/01/2012	<b>Restriction Supplement:</b>	None
<b>Mailing City/State:</b>	Des Moines, IA 50313	<b>Endorsements:</b>	LX		
		<b>Restrictions:</b>	NONE		
		<b>Date of Birth:</b>			
		<b>Sex:</b>	M		

*Removed  
MAB  
City of DSM*  
  
*Removed  
MAB  
City of DSM*

## History Information

### Convictions

				Total Records: 2	
Citation Date	Conviction Date	ACD	Explanation	County	JUR
08/23/2004	09/08/2004	S92	Speed (10 mph & under in 35-55 mph zone)	91	IA
04/04/2005	04/13/2005	S92	Speed	77	IA

**Name:** Grabill, David Odie **DL/ID:** 464KK5672

Pursuant to Iowa Code §321.10, I, Kim Snook, Director of Office of Driver Services, Iowa Department of Transportation, do hereby certify that I am the custodian of the records held by the Office of Driver Services, that this is a true and accurate copy of an official record currently in the custody of said office, and that I have been authorized by the Director of the Iowa Department of Transportation to so certify.

In witness whereof, I have caused my signature and the seal of the Department to be set upon this document, at Ankeny, Iowa this date:

1/13/2009

Office of Driver Services  
Iowa Department of Transportation

**Name:** Grabill, David Odie **DL/ID:** *MRB*

IN COMPLIANCE WITH SECTION 321.10, (IOWA CODE) IT IS HEREBY CERTIFIED THAT THIS IS A TRUE AND CORRECT COPY OF AN INSTRUMENT ON FILE IN THE DEPARTMENT OF TRANSPORTATION, IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF SAID DEPARTMENT AT DES MOINES, IOWA, THIS DATE:

JAN 13 2009

*Kim Snook*  
OFFICE OF DRIVER SERVICES



State of Iowa  
 Division of Criminal Investigation  
 215 E 7<sup>th</sup> St  
 Des Moines IA 50319  
 Ph. 515-725-6066 Fax 515-725-6080



09-24-25  
64

Iowa Criminal History Record Check  
 Walk-In Request

<b>Your name</b>	Heather Michelle Grabill
<b>Address</b>	6595 NW 10th Dr
<b>City/State/Zip</b>	Des Moines, Iowa 50313
<b>Phone#</b>	(515) 659-8285

Fill in all shaded areas.

Requesting an Iowa criminal history record check on:

<b>Last Name</b> <i>Apellido</i> (mandatory)	<b>First Name</b> <i>Primer Nombre</i> (mandatory)	<b>Middle Name</b> <i>Segundo Nombre</i> (recommended)
Grabill	Heather	Michelle
<b>Date of Birth</b> <i>Fecha Nacimiento</i> (mandatory)	<b>Gender</b> <i>Genero</i> (mandatory)	<b>Social Security Number</b> (recommended)
Removed - MRS City of DSM	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Removed - MRS City of DSM
yourself, please sign. If the request is on someone el		
Hunkshull		

**Results**

As of 1-13-09, a name and date of birth check revealed:

No record found

Record attached, DCI # \_\_\_\_\_

DCI initials Bde

DCI USE ONLY

STATE OF IOWA  
 D.P.S.  
 2009 JAN 13 PM 12:52  
 DIV. OF CRIMINAL  
 INVESTIGATION

**Receipt**

Number of requests 1 x \$10.00 per last name = Total amount \$ 10<sup>00</sup>

Method of payment:  cash  money order  check # \_\_\_\_\_  MasterCard or Visa

Cardholder's name \_\_\_\_\_ Last 4 digits of MC or Visa \_\_\_\_\_

DCI initials Bde

Credit Card Number # \_\_\_\_\_ Exp. Date \_\_\_\_\_



# Iowa Department of Transportation

Office of Driver Services  
PO Box 9204, Des Moines, IA 50306-9204

(Toll Free) 800-532-1121  
515-244-9124  
FAX: 515-239-1837

25  
64

## Certified Abstract of Driving Record

**Inquiry Date:** 1/13/2009  
**Name:** Grabill, Heather Michelle  
**Address:** 6595 NW 6th Dr

**City/State:** Des Moines, IA 50313

**Mailing Address:** 6595 NW 6th Dr

**Mailing City/State:** Des Moines, IA 50313

**DL/ID #:**  
**Class:** D *Removed with City of DSM*  
**Audit #:** 2579429  
**Issue Date:** 09/24/2008  
**Expiration Date:** 09/02/2009  
**Endorsements:** 3  
**Restrictions:** Motorcycle Instruction Permit

**Date of Birth:**  
**Sex:** F *Removed with City of DSM*

**Customer #:** 2221267  
**ID Status:** None  
**DL Status:** VAL  
**CDL Status:** None  
**Restriction Supplement:** None

## History Information

### Convictions

Citation Date	Conviction Date	ACD	Explanation	County	JUR
05/30/2004	06/23/2004	S92	Speed	77	IA
04/18/2006	05/15/2006	S92	Speed (10 mph & under in 35-55 mph zone)	8	IA
04/19/2006	05/15/2006	S92	Speed	77	IA
07/01/2007	07/18/2007		Speed (10 mph & under in 35-55 mph zone)	40	IA
08/28/2008	09/30/2008		Speed	50	IA

### Accidents - Accident involvement indicated does NOT mean the individual was at fault or given a citation.

Accident Date	Case Number	JUR
06/13/2006	6224214	IA

**Name:** Grabill, Heather Michelle **DL/ID:** 913AA2050

Pursuant to Iowa Code §321.10, I, Kim Snook, Director of Office of Driver Services, Iowa Department of Transportation, do hereby certify that I am the custodian of the records held by the Office of Driver Services, that this is a true and accurate copy of an official record currently in the custody of said office, and that I have been authorized by the Director of the Iowa Department of Transportation to so certify.

In witness whereof, I have caused my signature and the seal of the Department to be set upon this document, at Ankeny, Iowa this date:

1/13/2009

Office of Driver Services  
Iowa Department of Transportation

**Name:** Grabill, Heather Michelle **DL/ID:** *mrb*  
IN COPY WITH SECTION 204.13 (IOWA CODE) IT IS CORRECT COPY  
ON FILE IN THE DEPARTMENT OF TRANSPORTATION. IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF SAID DEPARTMENT AT DES MOINES, IOWA, THIS DATE:

JAN 13 2009

  
OFFICE OF DRIVER SERVICES

# File Iowa business taxes electronically through eFile & Pay!

For additional information, go to [www.state.ia.us/tax](http://www.state.ia.us/tax)

Iowa sales and use tax may be filed electronically online through the Department's Web site at [www.state.ia.us/tax](http://www.state.ia.us/tax) or by touch-tone telephone at 1-800-514-8296.

## Advantages to using eFile & Pay

- Secure
- Available 24/7
- Access to filing and payment history

## Questions about eFile & Pay?

Please contact our eFile Service Unit at [idrefile@iowa.gov](mailto:idrefile@iowa.gov) or call 515-281-8453 or 1-866-503-3453.

## Questions about completing this return?

Please contact Taxpayer Services at [idr@iowa.gov](mailto:idr@iowa.gov) or call 515-281-3114 or 1-800-367-3388

To use this form, please print front and back, and cut on the dotted line. Make check or money order payable to Treasurer State of Iowa. Mail to Sales/Use Tax Processing, Iowa Department of Revenue, PO Box 10412, Des Moines IA 50306-0412.

32-022a (07/07/08)

## EXEMPTIONS INSTRUCTIONS

Exemptions are sales made by you on which tax was not required to be charged. Enter your exemptions for the entire period on this return.

a. **Interstate Commerce:** Sales where delivery occurred outside Iowa.

b. **New Construction:** Sales of services performed on or in connection with new construction, reconstruction, alteration, expansion or remodeling of a building or structure.

c. **Industrial Machinery, Equipment and Computers:** Sales of qualifying items used directly and primarily in a manufacturing process or computers used by a commercial enterprise.

d. **Resale:** Sales of items that will be resold.

e. **Processing:** Sales of items that will be incorporated into another item for resale.

f. **Residential Utility:** Sales of metered gas, electricity, and fuel used as energy in residential dwellings.

g. **Sales Tax Holiday:** Qualified clothing and footwear sales made the first Friday and Saturday of August.

## IOWA SALES / RETAILER'S USE TAX RETURN EXEMPTIONS WORKSHEET

a	Interstate Commerce	00
b	New Construction	00
c	Industrial Machinery, Equip & Computers	00
d	Resale	00
e	Processing	00
f	Residential Utility	00
g	Sales Tax Holiday	00
h	Other: (Including Government)	00
i	Total Exemptions	00

h. **Other:** Any exempt sales made not in the previous categories. Describe briefly in the space next to "Other." A separate sheet of paper may be attached.

i. **Total Exemptions:** Add lines a-h; enter on line 4 of the return.

**IMPORTANT:** You must file even if you had no activity. If you have no sales to report, put zeroes on lines 1 and 12.

3001771062351123108 8

▲ Permit No. 1-77-106235      Period 01-01-08 to 12-31-08  
Date Due 01-31-09      ▲

\*\*\*\*\*AUTO\*\*5-DIGIT 50313  
OH HO VENTURE STRATEGIES LLC  
FREEDOM TAXICAB  
6595 NW 6TH DR  
DES MOINES, IA 50313-1163



## PART 1

1	Gross Sales	00
2	Goods Consumed	00
3	Total (add lines 1 and 2)	00
4	Exemptions (from line i of the worksheet)	00
5	Taxable Amount (line 3 minus line 4)	00

6a	State Sales Tax (6% of line 5)	00
6b	Total Local Option Tax (See Part 2)	00
7	Total Tax (add lines 6a and 6b)	00
8	Deposits / Overpayment Credits	
9	Balance (line 7 minus line 8)	
10	Penalty (if applicable)	
11	Interest (if applicable, see instructions)	
12	Total Amount Due (add lines 9-11)	

Signature of Retailer or Agent \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_



Sec. 126-183(11)

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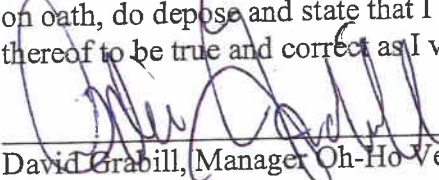
**Agents**

Searched: **oh-ho venture strategies llc**

**OH-HO VENTURE STRATEGIES, LLC - Corp No. 292078**

Name	Address1	Address2	City	State	Zip
DAVID GRABILL	6595 NW 6TH DR		DES MOINES	IA	50313


I, David Grabill, as Manager of Oh-Ho Venture Strategies, L.L.C., being first duly sworn on oath, do depose and state that I have read the above application and know the contents thereof to be true and correct as I verily believe.

  
\_\_\_\_\_  
David Grabill, Manager Oh-Ho Venture Strategies, L.L.C.

State of Iowa )  
                  ) ss  
County of Polk)

On this 19<sup>th</sup> day of February, 2009, before me, personally appeared David Grabill, Manager of Oh-Ho Venture Strategies, L.L.C., named in and who executed the foregoing instrument, and acknowledged that he executed the same as his voluntary act and deed.



  
\_\_\_\_\_  
Notary Public in and for the State of Iowa

09-734 25  
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<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 2/20/2009
<b>PRODUCER</b> Swett & Crawford c/o Account 109 S 7th Street, Suite 600 Minneapolis, MN 55402	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
<b>INSURED</b> FREEDOM TAXI CAB/MOBILE.COM 927 SW ORDINANCE RD #A ANKENY, IA 50021	<b>INSURERS AFFORDING COVERAGE</b> National Casualty Company INSURER A: INSURER B: INSURER C: INSURER D: INSURER E:	<b>NAIC #</b>

**COVERAGES**

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	CA00215147	04/09/2008	04/09/2009	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTH. EB. E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
X		OTHER physical damage	CA00215147	04/09/2008	04/09/2009	comp deductible 1000 coll deductible 1000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 All scheduled vehicles on the policy  
 Companies AM Best Rating is A+  
 30 days advance written notice of standard cancellation, 45 days of non-renewal and 10 days due to non-payment of premium.

<b>CERTIFICATE HOLDER</b> City of Des Moines 400 Robert D. Ray Drive  Des Moines IA 50309	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: <i>Douglas A. Falls</i>
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**IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

**DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

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Central Iowa Insurance Services, Inc.  
701 W. Second Avenue  
Indianola, IA 50125

12/16/2008

OH-HO Venture Strategies LLC  
ODIE G./ FREEDOM TAXI  
6595 NW 6TH DRIVE  
Des Moines, IA 50313

**Client:** OH-HO Venture Strategies LLC  
**Company:** Swett & Crawford/JHC  
**Policy #:** CAO0215147

RE: COVERED VEHICLES

COVERED VEHICLES AS OF 12/26/2008:

- 99 CHEV. VENTURE 1GNDU03E6XD194170
- 99 CHEV VENTURE 1GNDX03E8XD137878
- 99 CHEV VENTURE 1GNDX03E1XD290005
- 98 CHEV LUMINA 2G1WL52M6W9290895
- 96 CHEV LUMINA 2G1WL52M6T1126055

ALL OF THE ABOVE VEHICLES CARRY PRIMARY LIABILITY COVERAGE OF \$1,000,000.  
MEDICAL LIABILITY \$5,000  
UNINSURED/UNDERINSURED \$1,000,000  
POLICY #CAO0215147 - NATIONAL CASUALTY COMPANY  
POLICY EFFECTIVE DATES 04/09/08-04/09/2009

IF THERE ARE ANY QUESTIONS REGARDING THE ABOVE INFORMATION PLEASE.  
CONTACT CENTRAL IOWA INSURANCE INDIANOLA, IA @ 515-961-5301.

THANK YOU,

*Heidi Bowlin*  
HEIDI BOWLIN

299-0194



# CENTRAL IOWA



## INSURANCE SERVICES

**CARLISLE • INDIANOLA • LEON • OSCEOLA**

120 S. 1<sup>st</sup> Street  
PO Box 150  
Carlisle, IA 50047  
P: 515-989-0047  
F: 515-989-0254

701 W. 2<sup>nd</sup> Street  
PO Box 439  
Indianola, IA 50125  
P: 515-961-5301  
F: 515-961-5302

113 NW 2nd St  
PO Box 70  
Leon, IA 50144  
P: 641-446-8535  
F: 641-446-8525

108 E. Washington  
PO Box 98  
Osceola, IA 50213  
P: 641-342-2264  
F: 641-342-2543

**Toll Free – 866 – 989 - 0047**

<b>Send to:</b> Mike Berry	<b>From:</b> Heidi
<b>Attention:</b>	<b>Date:</b> 2-23-09
	<b>Office Location:</b> Indianola
<b>Fax Number:</b> 515-237-1640	<b>Phone Number:</b>

**Total pages, including cover: 3**

**Comments:**

Certificate of Insurance