

.....  
Date October 26, 2009

RESOLUTION SETTING DATE OF PUBLIC HEARING  
UPON APPLICATION FOR CERTIFICATE OF  
PUBLIC CONVENIENCE AND NECESSITY  
TO OPERATE LIMOUSINE SERVICES

WHEREAS, Section 126-62 of the Municipal Code forbids the operation of a limousine as a vehicle for hire upon the streets of Des Moines without obtaining a Certificate of Public Convenience and Necessity; and

WHEREAS, Michael G. Marks, seeking to do business as Marks Limousine Service, Des Moines, Iowa, has filed an application with the City Traffic Engineer requesting permission of the City Council to operate a limousine service in the City of Des Moines, which application is now on file in the office of the City Clerk for public review and consideration; and

WHEREAS, upon the filing of an application for a Certificate of Public Convenience and Necessity, Section 126-64 of the Municipal Code requires the City Council to fix a time and place for a public hearing on the matter of the issuance of a certificate to operate a limousine service; and

WHEREAS, Section 126-64 does require that written notice of the hearing be given to the applicant and all present holders of a certificate, if any.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF DES MOINES, IOWA:

1. That the Des Moines City Council shall hear the matter of the request to operate a limousine service in the City of Des Moines at the regularly scheduled City Council meeting on November 9, 2009, in the City Council Chambers at 5:00p.m.; and

2. That the City Clerk is directed to give written notice of the time and place of the scheduled hearing to the applicant at the following address and to all the present holders of a limousine certificate at their addresses of record.

Michael G. Marks  
Marks Limousine Service  
2433 SE 14<sup>th</sup> Street  
Des Moines, IA 50320

★ Roll Call Number

Agenda Item Number

20

Date October 26, 2009

3. That any interested person, pursuant to Section 126-64, may file with the City Clerk a memorandum in support of or opposition to the issuance of the certificate.

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

APPROVED AS TO FORM:

K. Massier

Katharine Ramsay Massier  
Deputy City Attorney

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

**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.

\_\_\_\_\_  
Mayor

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

### Limousine Company Application Checklist

Applicant: Michael G. Marks

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. 126-62.5. Requirements for limousine service.

Each company filing an application for a limousine certificate shall meet the following minimum requirements:

(1) Maintain a central place of business in a location properly zoned for that business and have a telephone so that any individual may request the services of the limousine company. The business shall have a listed telephone number. If vehicle maintenance and storage is provided separately from the central office, then the vehicle maintenance/storage area must also be in a location properly zoned for such activity.  
*MB*  
*244-1868*  
*2433 SE 14th*  
*2914 SE 14th*

(2) Provide transportation of passengers in a motor vehicle from or to any point in the city only on a prearranged basis, for a minimum of one hour at an hourly rate as provided in this article. For contracted limousine service the minimum trip rate and prearranged time restriction do not apply. For limousine service which is booked at least 24 hours in advance, the minimum trip rate does not apply.  
*Service Requirement*

(3) Meet all applicable zoning ordinance regulations.  
*MB*

#### Sec. 126-63. 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 or by an officer of the applicant 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 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, except that any person lawfully operating a limousine service at the time of adoption of this article shall not be required to provide such a statement.  
*MB*  
*Originals on file.*

2 | Limousine Company Application Checklist – City of Des Moines

- (2) *MRB* 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 the judgments. If the applicant is a firm, partnership, corporation or any other type of business entity 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. The federal tax identification number (or social security number for an individual) and state sales tax permit number shall also be provided. *original on file*
- (3) *MRB* 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.
- (4) *MRB* Any facts which the applicant believes tend to prove that public convenience and necessity requires the granting of a certificate.
- (5) *MRB* The number of vehicles to be operated or controlled by the applicant. – *one*
- (6) *MRB* The location of proposed vehicle storage. *2914 SE 14<sup>TH</sup>*
- (7) *MRB* A statement of the condition of the vehicles to be operated including the age and type of each vehicle, and the date on which the vehicle passed its most recent safety inspection, if any. *Provided*
- (8) *MRB* A statement as to whether the applicant has, within the ten years immediately preceding the date of application, been convicted of, pled guilty to or stipulated to the facts of violating any criminal statute or ordinance, including traffic laws and municipal ordinances. If the applicant has been convicted, a statement as to the date and place of conviction, the nature of the offense and the punishment imposed.
- (9) *MRB* The number of vehicles proposed for operation during periods of maximum demand and during periods of least demand. – *one*
- (10) *MRB* Where the applicant will operate its central place of business. *2433 SE 14<sup>TH</sup>*
- (11) *MRB* The color scheme or insignia, if used, to designate the vehicles of the applicant. *None.*
- (12) *MRB* Such further information as the traffic engineer may require of each applicant.
- Sec. 126-63.5. Investigation of applicant. *provided (enclosed)*

3 | Limousine Company Application Checklist – City of Des Moines

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.



**Sec. 126-66. Liability Insurance required. *Provided (Enclosed)***

- (a) A certificate shall not be issued or continued in effect unless and until the owner of the limousine business furnishes to the traffic engineer for filing with the city clerk an insurance policy or certificate of insurance issued by an insurance company licensed to do business in the state, providing commercial general liability and automobile liability insurance coverage, or the equivalent thereof, for the limousine business with minimum limits of liability equal to any applicable limits required by the Code of Iowa, the United States Code, and/or Interstate commerce commission regulation, whichever is greater. The above coverages and limits shall extend to the following on a per occurrence basis: The injury or death of any one person; the injury or death of any number of persons in one accident; damage to property in the care, custody and control of the insured but excluding property of the insured; the bodily injury or death of others resulting from negligent acts of the insured while involved in the furtherance of the limousine business.
- (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, non-renewal, reduction in insurance coverage or limits and ten days written notice for nonpayment by registered mail to the traffic engineer.
- (c) The cancellation or other termination of any required insurance policy shall automatically revoke and terminate the certificate and all licenses issued for the limousine business and the vehicles covered by such 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 limousine business and the vehicles covered by such insurance which is cancelled or terminated and shall file a copy of such notice with the city council.



**Sec. 126-82. Booking sheets. *Provided (Enclosed) Form previously approved by Chief of Police.***

- (a) Each holder shall maintain a daily booking sheet upon which are recorded all charters booked by the company each day, showing the date and time the charter was booked, the date and time of the service, place of origin and destination, number of passengers, and the amount of fare. Upon request by any

4 | Limousine Company Application Checklist – City of Des Moines

law enforcement officer or any city police cadet, any driver shall present the booking sheet, or a copy thereof, showing the name(s) of the passenger(s) being picked up, and if at the airport, the flight number of the arriving passenger(s).

- (b) Each holder shall retain and preserve all booking sheets in a safe place for at least one month following the date of the making of the record. Booking sheets shall be available to the chief of police or the traffic engineer.
- (c) 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 information on number and types of complaints received including specific information on any discrimination complaints; number of passengers carried; number of trips per vehicle; age, mileage and general condition of each vehicle; tenure and turnover of drivers' and other information as required by the traffic engineer.

**Sec. 126-62. Certificate of public convenience and necessity required.**

*service*  
Any person owning, operating or controlling a limousine 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 a certificate and the required annual limousine license from the traffic engineer. The following motor vehicles are excluded from the requirements of this article:

- (1) 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.
- (2) Ambulances and other emergency vehicles.
- (3) Funeral hearses.
- (4) Metropolitan Transit Authority buses or other commercial vehicles designed to transport 16 or more persons, including the driver, duly licensed by the state.

**Sec. 126-70. Limousine driver's license required.**

*MBB*  
Every person who operates a limousine for hire upon the streets of the city shall first obtain and shall properly display a limousine driver's license.

**Sec. 126-72. Designation. *None.***

*MBB*

5 | Limousine Company Application Checklist – City of Des Moines

Each limousine may bear on the outside of the door or on the side glass on each side the name of the company and, in addition, may bear an identifying design. If an identifying name or design is used, the markings shall be painted or affixed by decal in letters or figures at least 1 1/2 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 limousine or any official or emergency vehicle color scheme, identifying design, monogram or insignia in a manner that will mislead or deceive or defraud the public.

**Sec. 126-81. Limousine service.**

Limousine service may be undertaken by the holder of a certificate subject to the following conditions:

- (1) *Service* No limousine service shall be booked less than one hour prior to the service, except for contracted limousine service under a written contract or agreement on file with the traffic engineer.
- (2) *MRB* The holder shall maintain a central place of business in a location properly zoned for that business.
- (3) *MRB* If vehicle maintenance and storage is provided separately from the central office, then the vehicle maintenance/storage area must also be in a location properly zoned for such activity.
- (4) *MRB* The holder shall have a listed telephone number. *(515) 244-1869*
- (5) *Service* The service must be booked at a scheduled rate on file with the traffic engineer for a minimum of one hour, even if the trip requires less than one hour, except for contracted limousine service under a written contract or agreement on file with the traffic engineer.

Definitions

**Airport** means the Des Moines International Airport located in southwest Des Moines on Fleur Drive between McKinley Avenue and Army Post Road.

**Aviation director** means the director of the airport or an authorized representative.

**Booking** means an agreement between a limousine company and a passenger, or group of passengers, for limousine service at a specified time not less than one hour after the acceptance of such agreement.

**Booking sheet** means a record prepared by a limousine company of all charters booked by the company showing the date and time the charter was booked, the date and time

6 | **Limousine Company Application Checklist – City of Des Moines**

of the service, place of origin and destination, number of passengers, and the amount of fare. If service is provided at the airport, the booking sheet shall also include the name(s) of the passenger(s) being picked up and the flight number of the arriving passenger(s).

*Certificate* means a certificate of public convenience and necessity issued by the city council authorizing the holder to conduct a limousine service in the city.

*City clerk* means the city clerk or an authorized representative.

*Contracted limousine service* means a written agreement or contract with a business, for a period of not less than 180 days duration, for limousine service.

*Finance director* means the finance director of the city or an authorized representative.

*Holder* means a person to whom a certificate of public convenience and necessity has been issued.

*Limousine* means a motor vehicle engaged in the transportation of passengers for hire in limousine service.

*Limousine license* means the license granted annually to a person who holds a certificate to conduct a limousine service in the city.

*Limousine service* means transportation of passengers in a motor vehicle from or to any point in the city on a prearranged basis, for a minimum of one hour at an hourly rate.

*Rate card* means a card issued by the holder which contains the rates of fare then in force.

*Solicit* means to invite another, either by word or deed, to be a passenger in a vehicle for hire. Such deeds may include, but are not limited to, parking in any area where prospective passengers might be found without a booking sheet listing a specific passenger to be picked up.

*Traffic Engineer* means the city traffic engineer of the city or an authorized representative.



**MICHAEL R. BERRY**  
Traffic Facilities  
Administrator

Traffic & Transportation Division  
600 East Court Avenue, Suite 200  
Des Moines, IA 50309

(T) 515.283.4973  
(C) 515.202.1487  
(F) 515.237.1440

[www.dmgov.org](http://www.dmgov.org)

[mrberry@dmgov.org](mailto:mrberry@dmgov.org)



Attn: City Council:

Tuesday, September 15, 2009

My name is Mike Marks (48) and I am applying for certificate of public convenience and necessity, for my limousine business that I am starting. We'll be providing services to anyone requiring safe and elegant transportation around the greater Des Moines area.

With the growing presence of stars, actors, and entertainers that have been moving to the area this could be a great venture to embark on. In the past I have carpoled, driven friends kids to school, and many similar experiences to a lesser degree of providing transportation, but when I think of running a limousine service I want it to be a comforting sophisticated way to travel about the city, making memories for people so they can use our service from when they are teens going to their first prom all the way till their wedding day. That's the kind of experience I would want if it were me looking for a limousine service so that is what I want to bring to this city. We want to stand out by our service alone, for the time being we have chosen not to implement any logo or number on the car until we deem it necessary.

The limousine we have is being stored at D&R Custom Kitchens 2914 SE 14<sup>th</sup> St, while the base of operations for day to day business will be handled out of my home at 2433 SE 14<sup>th</sup> St. Des Moines IA 50320. Attached is verification that the vehicle is registered and licensed through the state and that it has been through the required safety inspections.

I am an upstanding citizen with no debt, or financial judgments against me. I have no criminal record and have never had my license revoked or suspended, as I am a very safe driver. Being an honest business man I want this venture to be beneficial for everyone that it can be of use to, as an income for me, and as a means of adding to the city in some way.

I'd like to extend my thanks to the entire City Council for taking the time to review my application and for consideration of my proposal.

Sincerely yours,

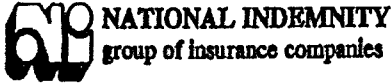


Mike Marks

P.S. We look forward to doing business with you!

**GEICO.**  
*Commercial Auto*

*In association with*



3024 Harney Street • Omaha Nebraska 68131

October 09, 2009

**MIKE G MARKS**  
2433 SE 14TH STREET  
DES MOINES, IA 50320

Policy questions, changes, or billing:

**1-800-691-3891**

**7:00 AM - 6:00 PM Central Time**

**Monday - Friday**

Policy Effective	09/17/2009 3:41 pm
Policy Expiration	09/17/2010 12:01 am
Policy Number	75 APG 020012 - 01
Billing Account Number	20915

Claim reporting:

**1-866-920-5459**

**24 hours a day**

**7 days a week**

To our policyholder:

Please find enclosed the document(s) indicated below.

Print Certificate Holder(s)

Please review the documents to ensure they accurately reflect the requested change in policy terms.

Please retain this endorsement for your records.

Regards,  
National Indemnity Company of Mid-America

20

POLICY NUMBER: 75APG020012-01

CERTIFICATE OF INSURANCE

M-45700 (01/2009)

This certificate of insurance is NOT an insurance policy and does not amend, extend or alter the coverage afforded by the policy listed herein. The terms, conditions and exclusions of the policy govern the rights and obligations of the Company to the named insured and any other insureds and may limit coverage. Provisions of any other contract, including agreements between the insured and anyone else, cannot and do not amend, extend, or alter any terms, conditions or exclusions in the policy. Additional insured and other endorsements may be authorized only by the Company or their appointed General Agents. Where reference is made to an Aggregate Limit, such limit is the company's maximum liability under the policy for the entire policy period regardless of the number of insureds, claimants or occurrences.

Date 10/09/2009 11:57 PM

NAMED INSURED MIKE G MARKS

NAMED INSURED'S ADDRESS 2433 SE 14TH STREET DES MOINES, IA 50320

INSURANCE COMPANY NAME: NATIONAL INDEMNITY COMPANY OF MID-AMERICA

INSURANCE COMPANY ADDRESS: 3024 Harney Street • Omaha, Nebraska • 68131-3680

POLICY NUMBER	TYPE OF INSURANCE	LIMITS	INCEPTION DATE EXPIRATION DATE	
75APG020012-01	<b>AUTOMOBILE LIABILITY</b>		09/17/2009 3:41 PM 09/17/2010 12:01 AM	
	Bodily Injury	Each Person \$ N/A		
		Each Accident \$ N/A		
	Property Damage	Each Accident \$ N/A		
	Bodily Injury & Property Damage	Combined Single Limit \$ 1,000,000		
	Other:	\$		
	<b>GARAGE LIABILITY - OTHER THAN AUTO</b>			
	Bodily Injury & Property Damage Combined Single Limit	\$ N/A		
	Aggregate Limit	\$ N/A		
	Garagekeepers Coverage			
	<input type="checkbox"/> Legal Liability <input type="checkbox"/> Direct Primary <input type="checkbox"/>	\$ N/A		
	Other:	\$ N/A		
	<b>CARGO COVERAGE</b>			
	Other:	\$ N/A		

The Company agrees to provide 30 days advanced notice to the Certificate Holder when this policy is cancelled.

Vehicle Schedule	Collision	Comp or Spec. Caus.	Stated Amount	Phys. Dam. Deductible
Vehicle Number (Year, Make, Model, VIN) 1991 LINCOLN TOWN CAR 1LNCM81W3MY690439	N/A		N/A	N/A

This Certificate issued to:  
City of Des Moines Traffic Divisions  
600 E Court Ave Suite 200A  
Des Moines, IA 50309

This Certificate issued by:  
GEICO Insurance Agency, Inc.  
One GEICO Boulevard  
Fredericksburg, VA 22412

Authorized Representative  
100002009 12:44 87F28831-8F67-4F16-BDF1-376C1F406D34

20



**City of Des Moines**  
**Permit and Development Center**  
602 Robert D Ray Drive  
Des Moines, IA 50309  
Phone: 515-283-4200  
Fax: 515-283-4270



September 11, 2009

Mike Berry  
City of Des Moines  
Traffic and Transportation Division  
600 E Court Ave  
Des Moines, IA 50309

Dear Mr. Berry:

The property located at 2433 SE 14<sup>th</sup> Street, in Des Moines is located in an area zoned C-2. This zoning classification will allow operation of a limousine service at this location.

If you have any other questions contact me at 515-283-4751 or email me at [prpoorman@dmgov.org](mailto:prpoorman@dmgov.org)

Sincerely,

Phillip R. Poorman, AICP  
Development Zoning Inspector

Blakes Auto and Exhaust  
1210 E 29th St.  
Des Moines, Iowa 50317  
(515)-282-5558

To Whom it may concern,

This is a statement stating that the vehicle listed below to my knowledge seems to be mechanically sound in all operating aspects. 1991 Lincoln Town Car, vehicle vin 1LN0M81W8MY690459.

Thank You  
Jeremy B. Finks

8-18-09

Apply online!



Iowa Department of Revenue  
www.state.ia.us/tax

Iowa Business Tax Registrar

Go to www.state.ia.us/tax

If you are applying for more than one type of tax permit and the mailing addresses or responsible parties are different, attach a separate sheet listing the appropriate information. It may take up to six weeks before you receive your permit; however, you are allowed to conduct business as soon as you submit your application.

PLEASE TYPE OR PRINT LEGIBLY

I. PHYSICAL LOCATION NAME/ADDRESS

Federal Employer ID Number: [redacted]  
(see info section 1)  
Social Security Number: [redacted]  
Legal Name: Mike G Marks  
Trade Name: MARKS Limbo  
Street Address (Not PO Box): 2439 SE 1457  
City: DSM State: IA Zip+4: 50326  
County Name: Polk County Number: \_\_\_\_\_  
Phone 1: 515 244-1322 Ext. \_\_\_\_\_  
Phone 2: 515 778-5679 Ext. \_\_\_\_\_  
Telephone Number Required

III. PREVIOUS OWNER

If you are purchasing this business, provide previous owner's name: \_\_\_\_\_

V: RETAILER REGISTRATION

Calendar quarters in which business is operated:

- Entire year  Jan.-March  April-June  
 July-Sept.  Oct.-Dec.

Type of products or services to be sold: LIMBO RENTAL

Check this box if your business is a hotel, motel, inn, or bed and breakfast.

SALES TAX PERMIT (no fee)

File through eFile & Pay. See Web site for more information.

\*Starting date for selling at retail: \_\_\_\_\_ (MM/DD/YY)

How much sales tax do you expect to collect?

- less than \$120 tax/year (File Annually)
- less than \$500 tax/month (File Quarterly)
- more than \$500 tax/month (File Monthly)
- more than \$5,000 tax/month (electronic payment required) (File Semi-Monthly)

If you have more than one location, do you want to file consolidated returns? \_\_\_\_\_

Number of locations to file consolidated: \_\_\_\_\_

See "INFORMATION" section on consolidated returns.

CONSUMER'S USE TAX (no fee):

This is only for those who purchase taxable goods or services that you consume in Iowa and do not pay sales tax when the purchases are made. File through eFile & Pay. See Web site for more information.

\*Starting date for making purchases: \_\_\_\_\_ (MM/DD/YY)

How much consumer's use tax do you think you will owe?

- less than \$120 tax/year (File Annually)
- more than \$120 tax/year (File Quarterly)

II. MAILING NAME/ADDRESS

If your mailing address is different than the location of your business, complete this section.

Name: Same  
Mailing Address: [RECEIVED]  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_  
Phone: SEP 11 2009 Bxt. \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext. \_\_\_\_\_  
TAXPAYER SERVICES

IV. TYPE OF OWNERSHIP (MUST check one)

- Sole Proprietor  Partnership  Corporation  
 Association  Government  Limited Liability Co

Date Established: \_\_\_\_\_

State in which Established: \_\_\_\_\_

OUT-OF-STATE RETAILER'S USE TAX PERMIT (no fee):  
Retailers making taxable sales in Iowa from an out-of-state location must register to collect retailer's use tax. File through eFile & Pay. See Web site for more information.

\*Starting date for selling at retail in Iowa: \_\_\_\_\_ (MM/DD/YY)

How much tax do you expect to collect?

- less than \$120 tax/year (File Annually)
- less than \$1,500 tax/month (File Quarterly)
- more than \$1,500 tax/month (File Monthly)

MOTOR VEHICLE RENTAL TAX (no fee)

If you rent motor vehicles to customers, you must collect this tax. Motor vehicle rental tax permit is always filed quarterly.

\*Starting date for renting automobiles in Iowa: \_\_\_\_\_ (MM/DD/YY)

HOUSEHOLD HAZARDOUS MATERIAL PERMIT:

See "INFORMATION" section for explanation of HHM permits.

\*Starting date for selling hazardous material: \_\_\_\_\_ (MM/DD/YY)

- Regular (\$25 fee)  Special (\$125 fee or more)

VI. WITHHOLDING TAX REGISTRATION (no fee)

Complete this section if you have employees. File through eFile & Pay. See Web site for more information.

\*Starting date for withholding Iowa income tax: \_\_\_\_\_ (MM/DD/YY)

How much Iowa income tax do you think you will be withholding?

Select a filing status:

- less than \$500 tax/month (File Quarterly)
- more than \$500 tax/month (File Monthly)
- more than \$10,000 tax/month (File Semi-Monthly) (electronic payment required)

See "INFORMATION" section for definition of withholding agent.

Withholding Agent's Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

**VII. CORPORATION/PARTNERSHIP REGISTRATION**

Complete this section only if you are registering to file corporation or partnership income tax returns.

\*Starting date for doing business in Iowa: \_\_\_\_\_ (MM/DD/YY)

If corporation, check type:

- Regular     S Corp     UBIT
- Coop         IC-DISC     FSC

If partnership, check here:

If Limited Liability Company (LLC), check here:

Month in which the tax year ends: \_\_\_\_\_

Primary business activity: \_\_\_\_\_

**VIII. OWNERS, GENERAL PARTNERS, CORPORATE OFFICERS AND RESPONSIBLE PARTIES**

Print the names and Social Security Numbers of all. Attach additional sheets if necessary. If partnership, you must include two names and Social Security Numbers.

Name: \_\_\_\_\_  
 SSN: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 SSN: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 SSN: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 SSN: \_\_\_\_\_

**IX. SIGNATURE**

This application must be signed by the owner, one of the partners or one of the corporate officers listed above. A preparer's signature is not acceptable unless he/she is one of the owners or corporate officers.

Signature: Mike G. Marks

Print Name Here: Mike G. Marks

Social Security Number: \_\_\_\_\_

Date: 9-11-09

**INCOMPLETE APPLICATIONS WILL DELAY PROCESSING.**  
 Returns filed late are subject to penalties and interest.  
 Multiple delinquent filings can result in revocation of sales tax permit(s) and assessment of substantial bonds.

**eFile & Pay:** File and pay your Iowa withholding, sales, consumer's use, retailer's use, corporate estimates, and motor fuel taxes through eFile & Pay. Businesses that prepare tax returns for clients may want to register as "bulk filers." More information is available on our Web site at [www.state.ia.us/tax](http://www.state.ia.us/tax)

FOR OFFICE USE ONLY

COUNTY: \_\_\_\_\_

PERMIT NUMBER \_\_\_\_\_ FILER TYPE \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BUS CLASS: \_\_\_\_\_ OWNER TYPE: \_\_\_\_\_

HOTEL/MOTEL: \_\_\_\_\_

**INFORMATION**

To apply for cigarette or tobacco licenses or any other permit not listed on this form, contact Taxpayer Services. Your application may be denied if you have any outstanding tax liability.

**Section I: Location Name/Address**

Federal Employer Identification Number: You must provide a FEIN if the owner of the business is a partnership, corporation, or government entity. If you are in the process of applying for a FEIN, write "applied for" on the FEIN line.

**Section IV: Type of Ownership**

Sole proprietors who plan to hire employees will need a FEIN.

**Section V: Retailer Registration**

**Consolidated Returns:** Except for Automobile Rental and Hotel/Motel Tax permits, consolidated sales tax returns may be filed by a retailer who has more than one sales tax permit. Attach a list of businesses, their locations, and Iowa sales tax permit numbers. If you are adding a new location to a current consolidated account, include your current consolidated number.

**Electronic Payment:** Anyone may choose to remit tax electronically. Semi-monthly filers are required to pay electronically.

**Household Hazardous Material Permit**

This permit must be obtained for each location selling household hazardous materials on a retail basis. Manufacturers and distributors that have independent agents selling door-to-door may purchase one permit fee of \$25 for the first \$3 million in sales of these materials. An additional \$100 fee is charged for each subsequent increment of \$3 million in sales. Fees are not prorated or refunded and must be renewed annually on July 1.

The most common household hazardous materials sold as defined by Iowa Code are motor oil and filters, fuels additives, degreasers, waxes, polishes, solvents, and stain removers with a petroleum base, petroleum-based fertilizers, and pesticides. It does not include laundry detergents, soaps, dishwashing compounds, chlorine bleach, personal care products, cosmetics and medications. For questions or a complete list, call 1-515-281-8941.

**Section VI: Withholding Tax -- Withholding Agent**

A withholding agent is a person who has the authority to make wage payments or delegate the authority. It does not matter if he or she does the actual work of keeping records, preparing returns or writing checks.

A withholding agent is personally, individually and corporately liable to the State of Iowa for withholding and paying any money required to be withheld and paid. If a withholding agent fails to withhold and pay the required amount, that amount may be assessed against the withholding agent. A payroll service is not a withholding agent.

**Mailing Address/Fax Number**

Registration Services, Iowa Department of Revenue, P.O. Box 10465, Des Moines IA 50306-0465, or fax to 515/281-3906.

**FOR ASSISTANCE..**

Web site: [www.state.ia.us/tax](http://www.state.ia.us/tax)  
 Phone: 515/281-3114 (local and out of state)  
 or 1-800-367-3388 (Iowa, Omaha and Rock Island/Moline)  
 E-mail: [kfr@iowa.gov](mailto:kfr@iowa.gov)

**IOWA COUNTIES AND COUNTY NUMBERS**

01-ADAIR	26-DAVIS	51-JEFFERSON	76-POCAHONTAS
02-ADAMS	27-DECATUR	52-JOHNSON	77-POLK
03-ALLAMAKEE	28-DELAWARE	53-JONES	78-POTTAWATTAMIE
04-APPANOOSE	29-DOBSON	54-KEOSAUQU	79-POWER
05-AUDUBON	30-DODSON	55-KOSSUTH	80-RAUSH
06-BENTON	31-DUBUQUE	56-LEE	81-SCOTT
07-BLACK HAWK	32-EMMET	57-LEWIS	82-SHELBY
08-BOONE	33-FAYETTE	58-LOUISA	83-SOLIC
09-BREMER	34-FLOYD	59-LUCAS	84-STORY
10-BUCHANAN	35-FRANKLIN	60-LYON	85-TAMA
11-BUENA VISTA	36-FREMONT	61-MADISON	86-TAYLOR
12-BUTLER	37-GENESE	62-MARSHALL	87-UNION
13-CALHOUN	38-GRANT	63-MARSHALL	88-YAN BURDEN
14-CARROLL	39-GRUNDY	64-MARSHALL	89-WAPARILLA
15-CASS	40-HAMMOND	65-MILLS	90-WASHINGTON
16-CEGAR	41-HAMMOND	66-MUSKOGEE	91-WARREN
17-CERRO GORDO	42-HARRISON	67-MONROE	92-WASHINGTON
18-CHEROKEE	43-HARRISON	68-MONTGOMERY	93-WAYNE
19-CHICKASAW	44-HENRY	69-MONTGOMERY	94-WEBSTER
20-CLARKE	45-HOWARD	70-MUSKOGEE	95-WINNEBAGO
21-CLAY	46-HUMBOLDT	71-OSAGE	96-WINNEBAGO
22-CLAYTON	47-IDA	72-OSCEOLA	97-WOODBURY
23-CLINTON	48-IOWA	73-PAGE	98-WORTH
24-CRAWFORD	49-IZARD	74-PALO ALTO	99-WRIGHT

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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



### Iowa Criminal History Record Check Walk-In Request

Your name <i>Mike G MARKS</i>
Address <i>2433 SE 145<sup>th</sup></i>
City/State/Zip <i>Des Moines IA 50320</i>
Phone# <i>515 778-5679</i>

Fill in all shaded areas.

#### Requesting an Iowa criminal history record check on:

Last Name <i>MARKS</i> <small>Apellido (mandatory)</small>	First Name <i>Mike</i> <small>Primer Nombre (mandatory)</small>	Middle Name <i>GORVER</i> <small>Segundo Nombre (recommended)</small>
Date of Birth <small>Fecha Nacimiento (mandatory)</small>	Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <small>Genero (mandatory)</small>	Social Security Number <small>(recommended)</small>
Waiver Signature <i>Mike G Marks</i> <small>Firma (If the request is on yourself, please sign. If the request is on someone else, write N/A.)</small>		

#### Results

As of 9-11-09, a name and date of birth check revealed:

No record found

Record attached, DCI # 423385

DCI initials Bde

DCI USE ONLY  
 2009 SEP 11 PM 1:41  
 DIVISION OF CRIMINAL INVESTIGATION  
 IOWA

#### 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 GR

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



IOWA CRIMINAL HISTORY  
COURT DISPOSITION PENDING  
STATUS UNKNOWN

DCI 00423385  
PAGE 1 OF 1  
DATE PRINTED-  
2009/09/11

DCI:00423385

NAME: MARKS, MICHAEL GROVER  
MARKS, MIKE

DOB	SEX	RAC	HGT	WGT	EYE	HAIR	SKN	POB
██████████	M	W	507	180	BRO	BRO	DRK	MO

ADDITIONAL IDENTIFIERS

CCH RECORD \*\*\*

01 ARRESTED 19910715  
AGENCY: IA0770000 POLK CO SO  
CHARGE NO- 01 IA STATUTE IA714-11-3  
FRAUDULENT PRACTICES/3RD DEGREE  
TRK#: L40181401

COURT DISPOSITION  
AGENCY: IA077015J POLK CO DIST COURT  
COUNT NO- 01 IA STATUTE IA714-211-3  
FRAUDULENT PRACTICES/3RD DEGREE  
TRK#: L40181401

SENTENCE		DISP EFF DAT
DEFERRED JUDGEMENT	2 Y	19910918
PROBATION	2Y	19910918
COMMUNITY SERVICE	40H	19910918

AN ARREST WITHOUT DISPOSITION IS NOT AN INDICATION OF GUILT. THIS RECORD MAINTAINED BY THE IOWA DIVISION OF CRIMINAL INVESTIGATION, BUREAU OF IDENTIFICATION IS A PUBLIC RECORD BUT CAN ONLY BE RELEASED TO NON-LAW ENFORCEMENT AGENCIES BY THE DCI.

IN THE ABSENCE OF FINGERPRINTS FOR POSITIVE IDENTIFICATION THIS RECORD IS BASED ON INFORMATION FURNISHED. WE CANNOT CONFIRM OR DENY THAT THE RECORD COVERS THE SUBJECT OF YOUR INQUIRY.  
DIVISION OF CRIMINAL INVESTIGATION

*Bob*

Chester J. Culver  
Governor  
Patty Judge  
Lt. Governor



Eugene T. Meyer  
Commissioner

SEPTEMBER 11, 2009

RE: MIKE GORVER MARKS

To Whom It May Concern:

Based on information submitted, the Iowa DIVISION OF CRIMINAL INVESTIGATION believes MIKE GORVER MARKS dob [REDACTED] (submitted) and MICHAEL GROVER MARKS dob [REDACTED] (appears on Criminal History) are one in the same.

Thank You.

A handwritten signature in cursive script, appearing to read "Becky".

IOWA DIVISION OF CRIMINAL INVESTIGATION

IN THE ABSENCE OF FINGERPRINTS FOR POSITIVE IDENTIFICATION THIS RECORD IS BASED ON INFORMATION FURNISHED. WE CANNOT CONFIRM OR DENY THAT THE RECORD COVERS THE SUBJECT OF YOUR INQUIRY.



# Iowa Department of Transportation

Office of Driver Services  
PO Box 9204, Des Moines, IA 50308-9204

(Toll Free) 800-532-1121  
515-244-8124  
FAX: 515-239-1837

## Certified Abstract of Driving Record

<b>Inquiry Date:</b>	7/24/2009	<b>DL/ID #:</b>	[REDACTED] (IA)	<b>Customer #:</b>	745668
<b>Name:</b>	Marks, Mike Grover	<b>Class:</b>	D	<b>ID Status:</b>	None
<b>Address:</b>	2433 Se 14th Street	<b>Audit #:</b>	3514880	<b>DL Status:</b>	VAL
		<b>Issue Date:</b>	07/16/2009	<b>CDL Status:</b>	None
<b>City/State:</b>	Des Moines, IA 50320	<b>Expiration Date:</b>	12/28/2012	<b>Restriction Supplement:</b>	None
		<b>Endorsements:</b>	3		
<b>Mailing Address:</b>	2433 Se 14th Street	<b>Restrictions:</b>	Corrective Lenses		
		<b>Date of Birth:</b>	[REDACTED]		
<b>Mailing City/State:</b>	Des Moines, IA 50320	<b>Sex:</b>	M		

## History Information

### Convictions

Citation Date	Conviction Date	ACD	Explanation	County	JUR	Total Records: 2
03/18/2005	04/11/2005	S92	Speed		NE	
09/01/2008	09/24/2008	S92	Speed		MO	

Name: Marks, Mike Grover DL/ID: [REDACTED]

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:

7/24/2009

Office of Driver Services  
Iowa Department of Transportation

Name: Marks, Mike Grover DL/ID: [REDACTED]



September 11, 2009

Mike G. Marks  
2433 Se 14<sup>th</sup> St  
Des Moines, IA 50320

To Whom It May Concern:

I am writing in regards to the account that has been established at Veridian Credit Union. Mike has had a membership with us at the Credit Union since 9/14/2004. His account is in good standing. If you have any questions please feel free to contact us 1-800-235-3228. Thank you for your attention to this matter.

Sincerely:

A handwritten signature in cursive script that reads "Kristin Melhus".

Kristin Melhus  
Branch Supervisor

P.O. Box 319  
1201 S Ankeny Blvd  
Ankeny, IA 50023  
515.289.1822  
[www.veridiancu.org](http://www.veridiancu.org)





Letter of Agency

Through this Letter of Agency ("LOA") I authorize Mediacom of Iowa, LLC to be known as "Mediacom", its subsidiaries and/or affiliates (collectively "Mediacom") to act as our agent to acquire the necessary information in order to make changes in the provider of my business's telephone services. I also authorize Mediacom to become my new business phone service provider for the telephone number(s) that I have specified below including becoming the carrier for any local, local toll, domestic long distance and international toll\*. I direct the current local provider of my business phone service to work with Mediacom to make these changes. This Letter of Agency supersedes all previous Letters of Authorization or Agency. I understand that, although this LOA authorizes Mediacom to submit porting orders on my behalf, Mediacom will not place orders to switch my service(s) until I have signed the appropriate Service Agreement with Mediacom.

By signing this Letter of Agency ("LOA") I certify that:

- 1. I am at least 18 years of age and that I am authorized to make decisions regarding changes of service for the telephone number(s) listed below.
2. I am authorizing Mediacom to act as my agent to obtain Customer Service Records/Customer Service Information for all services associated with the numbers listed on this form for provisioning purposes.
3. I am free of any third-party obligation preventing me from entering into this agreement.
4. I authorize Mediacom to act as my agent for the purpose of taking any and all actions required (including the removal of any account protection / freezes) to provision the services set forth in the Subscriber Agreement, which is incorporated herein.
5. I authorize Mediacom to switch my local, local toll, domestic long-distance and international toll\* service to Mediacom from my current carrier(s).
6. I understand that only one local phone company, one regional carrier and one long distance carrier can be designated for each telephone number; and I am designating Mediacom as the carrier for all these services for the telephone number(s) listed below.

List below the telephone number(s) to be changed to Mediacom:

Current Local Provider \_\_\_\_\_ Account Number: \_\_\_\_\_
Current LD Provider \_\_\_\_\_ Account Number: (if applicable) \_\_\_\_\_

Billing Telephone Number: \_\_\_\_\_ Telephone Number: \_\_\_\_\_
Fax Telephone Number: \_\_\_\_\_ Telephone Number: \_\_\_\_\_
Telephone Number: 515-246-2211 Telephone Number: \_\_\_\_\_
Telephone Number: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

\* Subject to agreement with international toll calling provision policy.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THIS LOA, THAT I AM AT LEAST 18 YEARS OLD, THAT I AM RESPONSIBLE FOR SELECTING AND AUTHORIZED TO SELECT THE BUSINESS SERVICE PROVIDER FOR THE TELEPHONE NUMBER(S) LISTED ABOVE; AND THAT I AUTHORIZE A SWITCH OF OUR COMPANY SERVICE TO MEDIACOM WHICH IS A SEPARATE AND INDEPENDENT COMPANY FROM OUR CURRENT CARRIER(S).

Signature: [Handwritten Signature]
Print Name: Mike Marks
Date: 9/25/09

Business Name: Marks Limousine Service
Address: 24335 E. 145th Des Moines IA 50320
Fed Tax ID #: 94-3487570

	Time		Pick Ups	Ex-tras	Trip Started From	Trip Finished At	Mr. Rd. on Rate Job	Amnt. Coll.
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# Sample Booking Sheet

*Form previously approved by Chief of Police M.B.*

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**CITY OF DES MOINES**  
Office of  
**TRAFFIC AND TRANSPORTATION**

**TO:** SPO Mike West, Traffic Unit  
DM Police Department

**DATE:** September 15, 2009

**FROM:** Mike Berry  
Eng. Dept. – Traffic Div.

**SUBJECT:** Transmittal of Request for a Certificate  
of Public Necessity to operate a  
Limousine Company – Michael Marks

Mike,

Attached, you will find the information that I have been provided by the applicant, Michael G. Marks, applying for a Certificate of Public Necessity to operate a Limousine Company.

Under §126-63.5 the Police Department has a requirement to investigation the criminal and drivers records of an applicant, when applying for a license to operate as a limousine company, in the City of Des Moines.

Please see the attached documents.

The applicant is asking that this go before Council as soon as possible. It is too late to make the September 24<sup>th</sup> meeting, so it will have to go on the 12<sup>th</sup> of October, to then set a hearing date for the following Council meeting date.

If I could hear back from you on this not later than the Wednesday, September 30<sup>th</sup>, I would appreciate it.

If you have any questions or further comments regarding this matter, please feel free to contact me. Thanks.



Michael R. Berry  
Traffic Facilities Administrator

Encl.

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**CITY OF DES MOINES**  
**OFFICE OF**  
**TRAFFIC SECTION**

**TO:** Mike Berry  
Eng. Dept  
Traffic Division

**DATE:** 17Sep09

**FROM:** Ben Ihde  
SPO  
Traffic Section

**SUBJECT:** Transmittal of Request for a  
Certificate  
of Public Necessity to operate a  
Limousine Company - Michael Marks

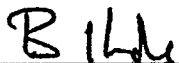
Mike Marks' driving records shows two violations; they were speed convictions, one on 01Sep08 (Missouri) and one on 18Mar05 (Nebraska).

Marks' Iowa Criminal History Check shows a deferred judgment for Fraudulent Practices, 3<sup>rd</sup> Degree. This occurred 18Sep91.

A check through Des Moines Police Department databases shows no criminal charges against Mike Marks.

On about 1Sep09, Mike Marks did apply for a Limousine Operator's license through Gary Fox's office. I conducted a criminal check at that time and approved his license.

I see no indications warranting denial of this applicant's Certificate of Public Necessity to operate a Limousine Company.



Ben Ihde 5018