



## SNOW PLOW BUSINESS INFORMATION

ccl-spb 6/17/14

Office of the City Clerk License Division

200 E. Wells St. Room 105, Milwaukee, WI 53202

(414) 286-2238 e-mail address: [license@milwaukee.gov](mailto:license@milwaukee.gov) [www.milwaukee.gov/license](http://www.milwaukee.gov/license)

### License Fee

\$50

### Forms Needed

- Business Application ccl-bapp1
- Supplemental Application for Snow Plow Businesses ccl-spb1
- Snow Plow Business Licensee's Certificate of Insurance ccl-spb1 (page 2)

### Vehicle Inspection

Inspection of your vehicle(s) must be completed before your application can be processed. Call Fleet Operations (414) 286-5561 to arrange for inspection. The inspection will be conducted at the Municipal Garage, 2142 W. Canal St.

Bring your application to the inspection and the inspector will sign, date and indicate "pass" or "fail" on the application. Applications cannot be processed without the Fleet Operations Inspector's signature.

### Certificate of Insurance

The attached certificate of insurance showing proof of at least \$5,000 of public liability on your snow plow must be submitted with your application.

### Fingerprinting

Not required.

### License Period

License expires 1 year from date of issuance.

License must be issued within 1 year of approval, or a waiver from the Licenses Committee is needed.

### Issuance of License

Your license will be issued once the vehicle(s) pass inspection, your insurance is approved, and the license fee has been paid.

### City of Milwaukee Ordinance Regulations

- MCO 116-12
- Available online at [www.milwaukee.gov/ordinances](http://www.milwaukee.gov/ordinances)



**FOR SNOW PLOW BUSINESSES  
SUPPLEMENTAL APPLICATION**

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**Vehicle Storage Information**

Address where vehicle(s) will be stored:

Locations to be plowed:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_

**To be reviewed/completed by Bureau of Fleet Operations**

Inspected by: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Vehicle(s) :				Pass	Fail
Year	Make	Model	VIN		

**“SUBMIT THIS FORM ALONG WITH THE “BUSINESS LICENSE APPLICATION”**

# SNOW PLOW BUSINESS CERTIFICATE OF INSURANCE

-----  
(Herein called Insurance Company)

Address -----  
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**ISSUED TO THE CITY OF MILWAUKEE, 200 E. Wells Street, Room 105, Milwaukee, WI 53202**

The company hereby certifies that it has issued to:

Name -----

Address -----  
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a general liability policy no. \_\_\_\_\_ effective \_\_\_\_\_, 20\_\_\_\_,

and expires \_\_\_\_\_, 20\_\_\_\_, providing for limits of at least \$5,000.00 provided however, that the insurance afforded is subject to the terms, conditions, limitations, and exclusions of the policy.

"The policy described in this certificate of insurance includes the coverage required by Section 116-12 of the Milwaukee Code of Ordinances."

Said policy provides that notwithstanding any other provision therein, ten days' written notice of cancellation, material change, expiration, or intent not to renew will be given to the City Clerk of the City of Milwaukee; otherwise such insurance as is afforded thereunder shall remain in full force and effect.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signed \_\_\_\_\_  
Authorized Representative