

**SECTION 1 - APPLICANT INFORMATION**

Name of Applicant: JMI LIMOUSINE, INC.

Trade Name(s) (if applicable): \_\_\_\_\_

**Mailing Address:**

**Physical Address:**

Street 3737 SW 117th

Street SAME

City Beaverton

City \_\_\_\_\_

State/Zip OR.

State/Zip \_\_\_\_\_

Phone Number: 97005

Fax Number: 503-644-3858

UBI #: 603463168

E-Mail: johnnymeeke@

JMIinsurance.com

**Type of business structure:**

Individual       Partnership

Corporation

Other (LP, LLP, LLC)

List the name, title, and percentage of partner's share or stock distribution for major stockholders:

<u>Name</u>	<u>Title</u>	<u>Stock Distributions or Percentage of Shares</u>
<u>N/A</u>	<u>Johnny Meeke</u>	<u>- owner - 100%</u>
	<u>Christine Banks</u>	<u>- compliance mgr</u>

List other certificates or permits held with the commission: \_\_\_\_\_

List your USDOT # 2360346 (If you don't have one you can go online at [www.fmcsa.dot.gov/online-registration](http://www.fmcsa.dot.gov/online-registration) or contact the Washington State Patrol at 360-596-3812 for assistance.)

**SECTION 2 - EQUIPMENT**

*(Attach additional sheets if necessary)*

<u>License Number</u>	<u>Year And Make Of Vehicle</u>	<u>Vehicle ID Number</u>	<u>Seating Capacity</u>
	<u>See attached</u>		
	<u>* list *</u>		