

Licensee: HAP TRANSPORTATION

DBA: HAP TRANSPORTATION

License #: 20150002227

3/26/17 To CAO for adverse action failed to complete application. KS

05/24/2017 Letter sent submit application for site plan review to DSI Zoning Division 06/23/2017 response date. JWF

01/27/2016 File with KS for follow-up. JWF

10/16/2015 Per conversation with LRZ applicant is working on submitting site plan application to TB. Recheck 01/08/2015 (gray file). JWF

07/23/2015 Need site plan approved before proceeding with processing of lic. application. JWF

License Query

Address | Licensee | Contact | License | Cardholder

Licensee Name: HAP TRANSPORTATION

DBA: HAP TRANSPORTATION

Sales Tax Id:


Find Now

OK

Cancel

New Search

Help



SEARCH WINDOW

License #	Tag #	Licensee Name	DBA	License Type	Status	Reason	Effective	Expiration	License Address	City	Ward	Bus. Phone #	Home Phone #	Unmet Req	Hold	Contact Last Name	First Name
150002227	0	HAP TRANSPORTATION	HAP TRANSPORTATION	Auto Repair Garage	Pending		07/23/2015	07/22/2016	41 ACKER ST E			(612) 294-2460		10	N	HAP TRANSPORTATI	

Properties For License 44 ACKER STE

Licensee: HAP TRANSPORTATION  
 DBA: HAP TRANSPORTATION

License Licensee Lic. Types Insurance Bond Requirements

Property  Licensee  Unofficial

Project Facilitator: ZANGS, LAWRENCE (LARRY)

Street #: 44  
 Street Name: ACKER  
 Street Type: ST Direction: E  
 Unit Ind: Unit #:   
 City: ST PAUL  
 State: MN Zip: 55117  
 Ward: 1  
 Dist Council: 06 [Browse](#)

Adverse Action Comments:

License Group Comments:  
 3/26/17 To CAO for adverse action failed to complete application. KS  
 05/24/2017 Letter sent submit application for site plan review to DSI Zoning Division 06/23/2017 response date. JWF

Licensee: HAP TRANSPORTATION  
 DBA: HAP TRANSPORTATION  
 Sales Tax Id: \*\*\*\*\* Bus Phone: (612) 294-2460

Licensee Comments:

License Type	Class	Effective	Expiration	Conditions	License Fee
Auto Repair Garage	N	07/23/2015	07/22/2016	N	\$431.00
<b>Total:</b>					<b>\$431.00</b>

License # 150002227 Save Changes to History

Properties For License 44 ACKER STE

Licensee: HAP TRANSPORTATION  
 DBA: HAP TRANSPORTATION

License | Licensee | Lic. Types | Insurance | Bond | Requirements

Licensee Name: HAP TRANSPORTATION   
 DBA: HAP TRANSPORTATION  
 Sales Tax Id: \*\*\*\*\* Non-Profit:  Worker's Comp: 08/26/2015   
 AA Contract Rec'd: 00/00/0000 AA Training Rec'd: 00/00/0000  
 AA Fee Collected: 00/00/0000 Discount Rec'd:

Other Agency Licenses

Other Licensing Agency Name / License Type	License #	Expiration	Reason	Active	Date

Contacts for this Licensee

Addr. Type	Active	Inactive	Last Name	First Name	Title	Bus. Phone
Business	07/23/2015	00/00/0000	HAP TRANSPORTA			(612) 294-2460
Mail To	07/23/2015	00/00/0000	VANG	BAO		(612) 294-2460
Other	07/23/2015	00/00/0000	VANG	LANG	MANAGER	(612) 294-2460
Other	07/23/2015	00/00/0000	VANG	BAO	CEO	(651) 495-9160

Mail License To:  
 Mail To Contact  
 License Address

Mail Invoice To:  
 Mail To Contact  
 License Address

Background Check Required

License # |150002227 Save Changes to History

Properties for Licensee Contact

Name | Address | Phone | Email | Groups

Street #: 394  
Street Name: UNIVERSITY  
Street Pre Direct: <All> [Browse]  
Street Type: AVE  
Street Post Direct: West  
Unit #:  
Unit Abbrev.:  
P.O. Box #:  
City: ST PAUL  
State: MN  
Country: U.S.A.  
Zip Code: 55103  
Zip+4:

Inter Office Address:  
[ ]

Override Formatted Address for Mailing  
US Post Formatted Address:  
[ ]

Last Upload: 01/01/1997

OK Cancel Help Save Changes to History

<input type="button" value="Pay"/> <input type="button" value="Print"/> <input type="button" value="Wsm"/> <input type="button" value="Hist"/> <input type="button" value="Summ"/>		Licensee: HAP TRANSPORTATION DBA: HAP TRANSPORTATION														
License: Licensee Lic. Types Insurance Bond Requirements																
License Type: Auto Repair Garage Effective: 07/23/2015 Expiration: 07/22/2016 Apply Discount: <input type="checkbox"/> Remove Discount: <input type="checkbox"/> Discount Rec'd: <input type="checkbox"/> Replace Fee: <input type="checkbox"/> # of Units: 1	License Class: IN Status: Pending Status Changed: 07/23/2015 Application Date: 07/23/2015															
Inspector Name Type Phone # Add SCHWEINLER, KRISTINA (KRIS) License (651) 266-9110 Remove TILLEY, CORNINE Zoning (651) 266-9085																
<table border="1"> <thead> <tr> <th>Name</th> <th>Trade Type</th> <th>Card #</th> <th>Card Type</th> <th>Expiration</th> <th>Add</th> <th>Remove</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Name	Trade Type	Card #	Card Type	Expiration	Add	Remove									
Name	Trade Type	Card #	Card Type	Expiration	Add	Remove										
Tag #: 0 Fields License Type Comments(long):																
<input type="button" value="New"/> <input type="button" value="Delete"/>	<input type="button" value="1 of 1"/>															
License # 150002227 Save Changes to History <input checked="" type="checkbox"/>	<input type="button" value="OK"/>	<input type="button" value="Cancel"/> <input type="button" value="Help"/>														

Pay Print Wsm Hist Summ Licensee HAP TRANSPORTATION DBA HAP TRANSPORTATION

License Licensee Lic. Types Insurance Bond Requirements

License Type: Auto Repair Garage Add Delete

OK	Requirement	Approval	Approved By	Conditions
<input checked="" type="checkbox"/>	Workers Comp - State Form	07/23/2015	LAB	N
<input checked="" type="checkbox"/>	Tax ID or Social Security Number	07/23/2015	LAB	N
<input checked="" type="checkbox"/>	Lease Agreement, Purchase Agreement, or Proof of	12/01/2016		N
<input checked="" type="checkbox"/>	Record Check	08/12/2015	RJH	N
<input type="checkbox"/>	Site Plan	00/00/0000		N
<input type="checkbox"/>	Zoning Inspection (651-266-9008)	00/00/0000		N
<input type="checkbox"/>	Notification letters to neighbors/organizations	00/00/0000		N
<input type="checkbox"/>	Notify District and City Councils	00/00/0000		N

License Group Conditions:

License Type Requirement Comments:  
 01/27/2016 File with KS for follow-up. JWF  
 08/12/15 Background Check is clear. No violations. RJH  
 07/27/15 Background Check requested. RJH

<< 1 of 1 >>

License # 150002227 Save Changes to History  OK Cancel Help

Licensee: HAP TRANSPORTATION  
 DBA: HAP TRANSPORTATION

License Type:

OK	Requirement	Approval	Approved By	Conditions
<input type="checkbox"/>	Notification letters to neighbors/organizations	00/00/0000		N
<input type="checkbox"/>	Notify District and City Councils	00/00/0000		N
<input type="checkbox"/>	Project Fac. Note: Response date for objections ex	00/00/0000		N
<input type="checkbox"/>	30 Days/300 Feet Except Downtown Notification	00/00/0000		N
<input type="checkbox"/>	License history check of address	00/00/0000		N
<input type="checkbox"/>	Request address incident report	00/00/0000		N
<input type="checkbox"/>	Verify applicant employment history/references	00/00/0000		N
<input type="checkbox"/>	Opening inspection	00/00/0000		N

License Group Conditions:

License Type Requirement Comments:  
 01/27/2016 File with KS for follow-up. JWF  
 08/12/15 Background Check is clear. No violations. RJH  
 07/27/15 Background Check requested. RJH

License # 
 Save Changes to History