



TOWING LICENSE APPLICATION

Date: _____

Business Name: _____ Phone: _____

Business Address: _____ Email: _____

Storage Location: _____

Applicant's Name: _____ Phone: _____

Applicant's Address: _____

Date of Birth: _____ SSN: _____

Have you been convicted of a theft related crime within the past 7 years? _____

If yes, please explain: _____

Have you been convicted of a crime involving violence or fraud within the past 7 years? _____

If yes, please explain: _____

Have you had a towing license revoked by action of the city manager within 5 years of the date of application? _____ If yes, please explain: _____

Please provide the following items:

1. List of current towing and storage fees.
2. List of properties from which vehicles may be towed.
3. Description and license tag number of vehicle(s) to be used for towing.
4. Certificate of Insurance for vehicles.
5. Copy of applicants current state or federal issued form of identification.
6. Copy of driver's medical certificate (If required by state or federal law).
7. Copy of driver's CDL (If required by state or federal law).
8. \$50.00 license fee.

Signature: _____

Sworn and subscribed before me this _____ day of _____, 20_____

Notary Public: _____

Commission Expires: _____