

# 2024 LAW ENFORCEMENT TOW LIST APPLICATION

All areas in white must be completed. Please print legibly.

## SECTION 1: BUSINESS INFORMATION

<b>Business Name:</b>			
<b>Business Office and Lot Address:</b> (shall be located at the same address)	STREET		
	CITY	STATE	ZIP CODE
<b>Business Phone:</b>	(      )	<b>Email:</b>	
<b>Capacity of Vehicle Storage Lot:</b>	Approximate Number of Vehicles	<b>Years in Business:</b>	Number of Years in Industry

## SECTION 2: OWNERSHIP/ MANAGEMENT

<b>Owner's Name:</b>	FIRST	MIDDLE	LAST
<b>Address:</b>	STREET	CITY	STATE      ZIP CODE
<b>Telephone:</b>	(      )	<b>Manager's Name:</b>	

## SECTION 3: AREA OF SERVICE

Check box for areas in which the business will perform services – black box (1st box) for light tows, **blue box** (2<sup>nd</sup> box) for heavy.\* **TOW TRUCKS MUST REACH THE SITE WITHIN 40 MINUTES (45 MINUTES for heavy tows) OF BEING CONTACTED BY COMMUNICATIONS.** Failure to reach the site within the required time is a refusal, which may result in punitive action up to and including removal from the Tow List.

Frederick City

## SECTION 4: ADDITIONAL SERVICES

- Road Service \_\_\_\_\_ (i.e., change flat tire, minor roadside repairs, etc.)
- Road Service Agency Certified (i.e., AAA, etc.) List Agencies:

## SECTION 5: DRIVERS

<b>Driver's Name:</b>	FIRST	MIDDLE	LAST
<b>Date of Birth:</b>	/ /	<b>Telephone:</b>	(      ) <b>Years in Towing:</b>
<b>Address:</b>	STREET	CITY	STATE      ZIP CODE
<b>Driver's License Number:</b>		<b>State Issued:</b>	

<b>Driver's Name:</b>	FIRST	MIDDLE	LAST
<b>Date of Birth:</b>	/ /	<b>Telephone:</b>	(      ) <b>Years in Towing:</b>
<b>Address:</b>	STREET	CITY	STATE      ZIP CODE
<b>Driver's License Number:</b>		<b>State Issued:</b>	

<b>Driver's Name:</b>	FIRST	MIDDLE	LAST
<b>Date of Birth:</b>	/ /	<b>Telephone:</b>	(      ) <b>Years in Towing:</b>
<b>Address:</b>	STREET	CITY	STATE      ZIP CODE
<b>Driver's License Number:</b>		<b>State Issued:</b>	

<b>Driver's Name:</b>	FIRST	MIDDLE	LAST
<b>Date of Birth:</b>	/ /	<b>Telephone:</b>	(      ) <b>Years in Towing:</b>
<b>Address:</b>	STREET	CITY	STATE      ZIP CODE
<b>Driver's License Number:</b>		<b>State Issued:</b>	



**The following documentation must be provided along with the application:**

- Business License
- Certificate of use & Occupancy
- Articles of Incorporation
- Articles of Organization
- Partnership Agreement (if applicable)
- Proof of General Liability Insurance w/30-day cancellation clause
  - o Must show workers compensation insurance.
- Copies of the driver's licenses for each driver