

LICENSE FEE: \$500.00

A. Applicant Name: _____ **DAYTIME PHONE NO:** () _____

Address: _____ EVENING PHONE NO: () _____

Address Where Tow Trucks Are Garaged and Dispatched:

CHECK ITEM WHICH APPLIES TO YOUR STATUS:

☐ Self-Employed ☐ Employed by a Corporation

☐ Employed by an Unincorporated Association

IF EMPLOYED BY A CORPORATION:

Name and Address of Corporation: _____
 _____ PHONE NUMBER: () _____

Names and Addresses of Each Officer, Director and Shareholder of the Corporation:_____

IF AN UNINCORPORATED ASSOCIATION, NAMES AND ADDRESSES OF EACH MEMBER:

IF EMPLOYED BY AN INDIVIDUAL:

Name, Address and Phone Number of Firm: _____

Name, Address and Phone Number of Individual Owner:

B. LIST ALL CRIMES, IF ANY, IN WHICH THE APPLICANT, MEMBER, OFFICER, DIRECTOR OR SHAREHOLDER HAS BEEN CONVICTED, STATING THE NAME AND LOCATION OF THE COURTS IN WHICH CONVICTED AND THE DATES ON WHICH SUCH CONVICTIONS WERE HAD AND THE PENALTIES IMPOSED THEREFOR. IF NONE, SO STATE:

C. DESCRIBE EXPERIENCE OF THE APPLICANT, OR, IF AN UNINCORPORATED ASSOCIATION OR A CORPORATION, OF ITS MEMBERS, OFFICERS, DIRECTORS AND SHAREHOLDERS, IN THE TOWING OF VEHICLES FOR HIRE:

D. VEHICLE(S) TO BE USED:

Year	Make	Model	GVWR	Registration No.	Vehicle I.D. No.

E. NAMES, ADDRESSES AND DRIVER'S LICENSE NUMBERS OF EACH DRIVER EMPLOYED BY APPLICANT:

F. LOCATION AND DESCRIPTION OF ANY AND ALL REGISTERED MOTOR VEHICLE REPAIR SHOPS PROPOSED TO BE USED BY THE APPLICANT, WITH A PHOTOGRAPH OF EACH PLUS PHOTOGRAPHS OF SIGNS PURSUANT TO TOWN CODE §91-6(B)(7) AND (8): _____

G. APPLICANT WISHES TO BE PLACED ON TOWING ROSTER (✓ Appropriate Boxes):

Light/Medium Towing ☐ YES ☐ NO

Heavy-Duty Towing ☐ YES ☐ NO

H. **ATTACH PROOF OF INSURANCE IN MINIMUM AMOUNT OF ONE MILLION DOLLARS (\$1,000,000) SINGLE LIMIT GENERAL LIABILITY COVERAGE NAMING TOWN OF TUXEDO AS AN ADDITIONAL INSURED.**

I. **ATTACH PROOF OF VALID REGISTRATION AND INSPECTION OF EACH TOW TRUCK TO BE OPERATED.**

J. **APPLICANT QUALIFICATIONS, PURSUANT TO §91-6 OF THE CODE OF THE TOWN OF TUXEDO:**

(✓ Appropriate Boxes):

Yes No

☐ ☐ Light/Medium Towing Applicant owns, leases, operates or maintains (or has a contract with) a bona-fide Registered Motor Vehicle Repair Shop within the Town of Tuxedo or within 2-1/2 miles of Tuxedo Town line.

☐ ☐ Heavy-Duty Towing Applicant owns, leases, operates or maintains (or has a contract with) a bona-fide Registered Motor Vehicle Repair Shop within the Town of Tuxedo or within 20 miles of Tuxedo Town line.

IF NOT OWNED, copy of lease or contract for service from Motor Vehicle Repair Shop attached hereto: ☐ YES ☐ NO

☐ ☐ Applicant maintains 24-hour capability to answer emergency calls regarding motor vehicles.

☐ ☐ Applicant has one or more suitable towing vehicles, reasonably equipped as required by §91-13 of the Tuxedo Town Code.

☐ ☐ Applicant owns or leases, for the term of the towing license, a secure storage lot for a minimum of five cars within one-half mile from the applicant's repair facility.

☐ ☐ Applicant's equipment is capable of two-way communication between the point of incoming calls for assistance and the farthest point in the zone.

☐ ☐ Applicant and applicant's employees and operators have taken training course(s) as may be prescribed from time to time by any applicable laws, specifically designed to educate and familiarize them with customary safety standards

☐ ☐ Applicant is able to meet all other conditions of Chapter 91 of the Code of the Town of Tuxedo.

SCHEDULE OF FEES

Application Fee \$500.00

Towing Fee \$135/tow 8:00 a.m. – 5:00 p.m. Mon. through Fri.
\$135/tow 5:00 p.m. – 8:00 a.m. Mon. through Fri.
\$135/tow Saturday and Sunday

Mileage \$2.00 per mile first 10 miles, \$5.50 per mile above 10 miles

Police Impounds \$100.00

Storage - Outdoor \$35.00 per day

Inside Fence \$40.00 per day

Indoors \$50.00 per day

Heavy-Duty Tows Only: Extraordinary Emergency Response Reimbursement: 5% of total towing fee, to be collected by tower on behalf of Town from operator of towed vehicle if more than two hours elapse from arrival of tow to completion of vehicle removal

NOTE: Licensee(s) must furnish and use an invoice in a format *approved by the Town*, which shall include a rate schedule.

State of New York, County of Orange

_____, being duly sworn, deposes and says that all of the answers in the foregoing application are true.

Signature of Applicant

SWORN TO BEFORE ME THIS _____ DAY
OF _____, 20____.

Notary Public

===== **FOR OFFICE USE ONLY** =====

APPROVED BY: ☐ POLICE CHIEF Signature: _____ Date: _____

☐ TOWN BOARD By Resolution Dated: _____

TOWN CLERK: LICENSE FEE: \$ _____ DATE PAID: _____ ☐ CASH ☐ CHECK # _____