TOWNSHIP OF MIDDLETOWN

APPLICATION - TOWING LICENSE

NAME (BUSINESS)_____ PHONE #_____

ADDRESS_____

OWNER(S) NAME_____

ADDRESS_____

NAME_____

ADDRESS_____

VEHICLES TO BE USED (WRECKER, FLATBED, ETC.)

1. MAKE_____ MODEL_____

YEAR_____ WEIGHT CLASS_____

REG #_____ INSP. DATE_____

2. MAKE_____ MODEL_____

YEAR_____ WEIGHT CLASS_____

REG #_____ INSP. DATE_____

3. MAKE_____ MODEL_____

YEAR_____ WEIGHT CLASS_____

REG #_____ INSP. DATE_____

INSURANCE COMPANY

NAME_____ COPY ATTACHED: YES___ NO___

ADDRESS_____ TOWNSHIP NAMED AS ADDITIONAL

POLICY #_____ INSURED: YES_____ NO_____

COVERAGE_____

EXP. DATE_____

OPERATORS (INCLUDING OWNERS):

1. NAME_____

ADDRESS_____

_____

D.L.#_____

2. NAME_____

ADDRESS_____

_____

D.L. #_____

3. NAME_____

ADDRESS_____

_____

D.L.#_____

2. NAME_____

ADDRESS_____

_____

D.L. #_____

THE APPLICANT HEREBY CERTIFIES THAT HE HAS OBTAINED A COPY OF ORDINANCE #93-2337 WHICH DEALS WITH TOWING LICENSES, AND HAS READ THIS ORDINANCE PRIOR TO FILING THIS APPLICATION AND AGREES TO COMPLY WITH ALL OF ITS PROVISIONS.

APPLICANT'S SIGNATURE_____ DATE_____

APPLICATION FEE: $50

LICENSE ISSUED: YES_____ NO_____ DATE _____

LICENSE #_____ LICENSE FEE: $125.00