

**TOW VEHICLE PERMIT
 NEW/RENEWAL APPLICATIONS**

CUSTOMER CHECK LIST

Complete and submit permit application	
Personal disclosure form <i>for each person</i> with a 10% financial interest in the business	
Provide copy of current registration for each vehicle.	
Provide copy of brake & lamp certificates or CHP inspection certification for each vehicle.	
Current Business Operations Tax Certificate BOT # _____	
Provide Certificate of Insurance: See attachment for specific insurance requirements (Insurance application, receipt of payment or insurance binder are not acceptable)	
Fees Required: 1st Vehicle: \$79 Additional Vehicles: \$67	

Submit application to:

City of Sacramento
 Business Permits
 915 I Street, Room 1201
 Sacramento, CA 95814
 Phone: (916) 808-5852

TOW COMPANY APPLICATION

Business Information

BUSINESS NAME:	
MANAGER:	
BUSINESS ADDRESS:	PHONE:

STORAGE INFORMATION **LIST ALL ADDRESSES IN OR OUT OF THE CITY USED FOR VEHICLE STORAGE

ADDRESS:
ADDRESS:
ADDRESS:

Dispatch Information

Dispatch:	Phone:
Address:	

Mailing Information

Mail To:
Address:

Insurance Information

Company Name:	Phone:
Agent Contact:	
Address:	

I declare under penalty of perjury that to my knowledge all information contained on this application is true and correct, and that if any of the above information should change I will contact the City of Sacramento at:

Business Permits
915 I STREET, ROOM 1201
SACRAMENTO, CA 95814-2696
(916) 808-5852

businesspermits@cityofsacramento.org

SIGNATURE

DATE

TOW VEHICLE RATE SCHEDULE

Day Towing (M-F)

Hours: _____

Night Towing (M-F)

Hours: _____

Saturdays, Sundays, & Holidays

Hours: _____

ABOVE RATES INCLUDE _____ minutes work at scene. Time starts at commencement of work.
 Towing vehicle from scene to place of business of tow operator to within a five-mile radius of point of pick-up

ADDITIONAL RECOVERY TIME each _____ minutes of fraction thereof.
 This is time spent in the actual tow operation.

\$

EACH ADDITIONAL on tows outside of tow zone or _____ mile radius.

\$

USE OF DOLLIES WHEN NECESSARY:

Diligent effort shall be made by tow driver to unlock vehicles to be towed rather than to dolly the vehicle. This effort is part of the tow service, and no extra charge is to be made.

SERVICE CALLS-No towing required.

Day:

\$

Night:

\$

AFTER HOUR RELEASE

\$

STORAGE RATES

Outside (Per Day):

\$

Under Cover (Per Day):

\$

OTHER (explain) _____

Signature _____

Date _____

TOW COMPANY OWNERSHIP INFORMATION SHEET

BUSINESS NAME:			
BUSINESS ADDRESS:			
BUSINESS TELEPHONE:		EMAIL:	
BUSINESS OFFICE OPEN (CHECK DAYS OPEN):			
MONDAY	TUESDAY	WEDNESDAY	THURSDAY
FRIDAY	SATURDAY	SUNDAY	
HOURS OF OPERATION:			
FROM:	TO:	24/7: <input type="checkbox"/>	
LIST:			
a. All partners and corporate shareholders having a 10% or greater financial interest in the business; AND b. All corporate officers			
Each person with a 10% or greater financial interest must complete a Personal Disclosure Form			
NAME	ADDRESS	PERCENTAGE INTEREST	POSITION
NAME	ADDRESS	PERCENTAGE INTEREST	POSITION
NAME	ADDRESS	PERCENTAGE INTEREST	POSITION
NAME	ADDRESS	PERCENTAGE INTEREST	POSITION

SIGNATURE **TITLE** **DATE**

TOW VEHICLE PERMIT APPLICATION

Company Name: _____

I hereby request the City of Sacramento to begin the tow car vehicle permit process for (# of) _____ vehicles listed separately below. I understand the permit fees for each vehicle is assessed in advance and is non-refundable. I certify that the vehicles to be inspected meet the standards imposed by the City Code Chapter 5.144.

Signature

Date

Vehicle Listing

State Vehicle License Number(s):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____