

# Towing License Application

# Warrington Township

This form must be completed in its entirety by the individual or group requesting a towing license and returned with any supplemental information and/or fees required to Warrington Township, 852 Easton Road, Warrington, PA 18976 for consideration. All questions regarding this form should be directed to the Warrington Township Police Department at (215) 343-3311.

Business Submitting Application: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address of Business in Warrington (P.O. Boxes not accepted): \_\_\_\_\_

Telephone #: (business) \_\_\_\_\_ Cell #: \_\_\_\_\_

## Type of Business Organization:

Sole Proprietorship     Partnership     Corporation     Other: \_\_\_\_\_

## Name, Address and Telephone Number of Owner(s):

Name of Owner: \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone #: (home) \_\_\_\_\_

## Certificate of Insurance:

A certificate of insurance or other proof acceptable to the Township that the applicant has obtained the general liability and garage keeper's liability insurance required for the issuance of a Towing License must be submitted to Warrington Township with this application.

*The individual or group acknowledges having received and read the Warrington Township Ordinance 01-0-10 and agrees to abide by all rules and regulations set forth therein. The organization further agrees to cooperate with any Township official requesting user to act in accordance with the above stated guidelines. Full responsibility for any damage to property or persons is assumed by the undersigned. The Township, its officials, employees, agents and volunteers shall be saved harmless from any claim and/or liability hereby arising out of, or in connection with the function, activities and uses of the Towing License.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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### For Office Use Only

Date Received: \_\_\_\_\_ Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date Approved: \_\_\_\_\_

License Fee: \_\_\_\_\_ Received: \_\_\_\_\_ Date: \_\_\_\_\_

Insurance Certificates: *General Liability*: Yes \_\_\_\_\_ No \_\_\_\_\_ *Garage Keepers Liability*: Yes \_\_\_\_\_ No \_\_\_\_\_

Permit Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_

**List of Vehicles Available for Township Service:**

This list must include all of the tow trucks, vehicle wreckers, car carriers or other vehicles available for service to the Township, including a description of each vehicle or piece of equipment (including Type, Make, Model, Year, etc), the name and address of the owner/lessee of each vehicle or piece of equipment and their location and hourly availability.

**Type:        Make:        Model:        Year:        GVW:        Description:**

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**Name, Address of Owner of each Vehicle:        Location:        Hourly Availability:**

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**Address and Premises Description:**

This paragraph must include the working address and description of the premises upon which any disabled or wrecked vehicles will be towed to and/or stored, including the size of the area on the premises available for storage vehicles, the approximate number of vehicles which may be stored in the area, whether said area is fenced, and a description of any security precautions or protection methods for vehicles stored in said area.

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