

APPLICATION FOR POLICE DEPARTMENT TOWING LICENSE  
Application #\_\_\_\_\_

Berkeley Township Police Department Traffic Safety Bureau

Name Of Applicant: \_\_\_\_\_

Trade Name (Trading As): \_\_\_\_\_

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

Business Telephone # \_\_\_\_\_ Home Telephone # \_\_\_\_\_ Cell or Pager # \_\_\_\_\_  
24 Hour On Call Service Telephone #\_\_\_\_\_

INSURANCE STATEMENT: (Attach Copy of Policy with Current Data)

Name Of Insurance Carrier: \_\_\_\_\_  
Policy #\_\_\_\_\_

Name of Agent: \_\_\_\_\_

Address\_\_\_\_\_

Telephone #\_\_\_\_\_

List Of Coverage \_\_\_\_\_  
\_\_\_\_\_

EQUIPMENT REQUIREMENTS: (Attach Any Agreements to Application)

1. Wrecker J-Hook and or front wheel lift which is capable towing both front wheel and rear wheel drive vehicles with a GVW of 8,000 Pounds:

Make: \_\_\_\_\_ Year: \_\_\_\_\_  
Model \_\_\_\_\_  
Registration #: \_\_\_\_\_

2. Flatbed or Car Carrier with at least one-car capacity capable of removing and carrying a vehicle of up to 10,000 pounds:

Make: \_\_\_\_\_ Year: \_\_\_\_\_  
Model: \_\_\_\_\_  
Registration #: \_\_\_\_\_

3. Motorcycle Carrier:

Make: \_\_\_\_\_ Year: \_\_\_\_\_  
Model: \_\_\_\_\_  
Registration #: \_\_\_\_\_

4. Facilities:

Location: \_\_\_\_\_  
Address: \_\_\_\_\_  
Days Of Operation: \_\_\_\_\_  
Hours of Operation: \_\_\_\_\_  
Holidays Closed: \_\_\_\_\_  
\_\_\_\_\_

List Attachments:

1. Proof of Insurance
2. Copies of Employees Photo Driver's License (Front & Back)
3. Wrecker Manufacturers GVW Statement
4. Schedule of Rates
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_

List of All Drivers (Please attach copies of Drivers licenses)

Name

Address

D.L. #

SS#

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I, \_\_\_\_\_, HAVING READ REVISED ORDINANCE #122 OF THE CODE OF THE TOWNSHIP OF BERKELEY AND FULLY UNDERSTANDING SAID ORDINANCE, MAKE THIS DECLARATION THAT I, \_\_\_\_\_, AGREE TO CONFORM TO THE STANDARDS OF LICENSING HEREIN. ALL STATEMENTS ON THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

(Notary Public)

SWORN AND SUBSCRIBED BEFORE ME  
THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ -200\_\_\_\_\_

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***For Municipal use only***

EQUIPMENT INSPECTION:

*(circle one)*

|                         |             |                 |
|-------------------------|-------------|-----------------|
| 1. Wrecker:             | PASS / FAIL | Comments: _____ |
| <hr/>                   |             |                 |
| 2. Flatbed/Car Carrier: | PASS / FAIL | Comments: _____ |
| <hr/>                   |             |                 |
| 3. Motorcycle Carrier:  | PASS / FAIL | Comments: _____ |
| <hr/>                   |             |                 |
| 4. Facilities:          | PASS / FAIL | Comments: _____ |
| <hr/>                   |             |                 |

Date of Inspection: \_\_\_\_\_ Inspector: \_\_\_\_\_

**LICENSE DENIED**

Reason for Denial:

**LICENSE ISSUED**

Date of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Fee received: Check \_\_\_\_\_ Cash \_\_\_\_\_ Money Order \_\_\_\_\_

Application Fee: \_\_\_\_\_ Inspection Fee: \_\_\_\_\_ License Fee: \_\_\_\_\_