



APPLICATION
STANDARD TOWING SERVICE

Name of towing business: _____

Name of business (trading as, if different): _____

Location of storage lot: _____

Do you have a City of Winchester business license? [] Yes [] No

Telephone numbers: Operational Hours _____ After Hours _____
(Must be a landline or cell phone, NOT a pager or beeper)

Business hours: Monday _____ to _____ Tuesday _____ to _____
Wednesday _____ to _____ Thursday _____ to _____
Friday _____ to _____ Saturday _____ to _____
Sunday _____ to _____

Location of office to claim stored vehicles: _____

Owner's name: _____ Phone number: _____

Owner's home address: _____

Agent's name (if different): _____ Phone number: _____

Agent's home address: _____

Agent's business address: _____

List all available equipment, including size and capability (attached separate sheet if necessary):

Please list all insurance policies and carriers including coverage limits, worker's compensation, etc. (if applicable):

By signature, I (as the business owner or agent) agree to perform towing on a continuous, twenty-four (24) hours/day, three hundred sixty-five (365) days per year. I also understand that I, as the business owner or agent accept reasonable responsibility for a towed vehicle from the time hook-up starts until the vehicle reaches its intended destination. I accept reasonable responsibility for any personal property left in towed and stored vehicles and will note a description of the secure place which will be used to store the property left in towed or stored vehicles. I shall provide law enforcement requested towing in accordance with the City of Winchester Tow Ordinance, as directed by the Chief of Police.

Signature: _____

Date: _____

Treasurer's Office Use Only: I certify that neither the tower nor any of the principals of the tower's business entity has outstanding debt to the City.

Initial Here:



APPLICATION
WRECKER FLEET

Company name: _____

List all trucks submitted for use in law enforcement requested towing in the City of Winchester, Virginia (use additional sheet if necessary).

Company Truck #: _____	VDOT #: _____	<input type="checkbox"/> Rollback	<input type="checkbox"/> Conventional	<input type="checkbox"/> Heavy Duty
Make: _____	Model: _____	Year: _____	Tag: _____	
State: _____	VIN #: _____	<input type="checkbox"/> Leased	<input type="checkbox"/> Owned	

Company Truck #: _____	VDOT #: _____	<input type="checkbox"/> Rollback	<input type="checkbox"/> Conventional	<input type="checkbox"/> Heavy Duty
Make: _____	Model: _____	Year: _____	Tag: _____	
State: _____	VIN #: _____	<input type="checkbox"/> Leased	<input type="checkbox"/> Owned	

Company Truck #: _____	VDOT #: _____	<input type="checkbox"/> Rollback	<input type="checkbox"/> Conventional	<input type="checkbox"/> Heavy Duty
Make: _____	Model: _____	Year: _____	Tag: _____	
State: _____	VIN #: _____	<input type="checkbox"/> Leased	<input type="checkbox"/> Owned	

Company Truck #: _____	VDOT #: _____	<input type="checkbox"/> Rollback	<input type="checkbox"/> Conventional	<input type="checkbox"/> Heavy Duty
Make: _____	Model: _____	Year: _____	Tag: _____	
State: _____	VIN #: _____	<input type="checkbox"/> Leased	<input type="checkbox"/> Owned	

Company Truck #: _____	VDOT #: _____	<input type="checkbox"/> Rollback	<input type="checkbox"/> Conventional	<input type="checkbox"/> Heavy Duty
Make: _____	Model: _____	Year: _____	Tag: _____	
State: _____	VIN #: _____	<input type="checkbox"/> Leased	<input type="checkbox"/> Owned	

Company Truck #: _____	VDOT #: _____	<input type="checkbox"/> Rollback	<input type="checkbox"/> Conventional	<input type="checkbox"/> Heavy Duty
Make: _____	Model: _____	Year: _____	Tag: _____	
State: _____	VIN #: _____	<input type="checkbox"/> Leased	<input type="checkbox"/> Owned	



TOW SERVICE AGREEMENT

By signing this document, I, _____, do hereby swear or affirm (Name)

that I am authorized as agent and/or employee of _____ (hereinafter "the Company"), (Name of Towing Company)

with full authority to act on behalf of and bind the Company to the terms of this document. It is hereby understood and acknowledge that by accepting requests for towing from law enforcement in the City of Winchester, the Company accepts responsibility for the towed vehicle from the time hookup starts until the vehicle reaches its intended destination. The Company further accepts responsibility for any personal property left in such towed and stored vehicles. The Company agrees to abide by all applicable laws of the Commonwealth of Virginia and all policies issued by the Winchester Police Department related to the provision of towing services. The Company further agrees to indemnify and hold harmless the City of Winchester, its agents, employees and representatives from any and all claims, casualties, damages or injuries, including but not limited to attorney's fees, arising as a result of the provision of towing services for law enforcement in the City of Winchester and performance or failure to perform in accordance with the terms of this Agreement.

The storage facility for vehicles towed pursuant to this Agreement is located at the following address:

_____ (Address for Storage Facility)

and is comprised of an area not less than 1,500 square feet. This facility is graveled or paved and is capable of being properly secured. Other storage facilities for vehicles towed pursuant to this Agreement shall not be used without the prior written consent of the Winchester Police Department.

Name of Towing Company (please print): _____

Signature: _____ Date: _____

Title: _____

Commonwealth of _____

City/County of _____

On this _____ day of _____, 20_____, for foregoing

_____ did appear before me, a Notary Public for the Commonwealth of Virginia, and on behalf of _____ Towing Company, did affix his/her signature and swear or affirm that the representations made in this document are true and correct.



_____ (Notary Public)

Notary ID #: _____

My Commission Expires: ____ / ____ / ____