

Village of New York Mills

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CLERK / TREASURER / REGISTRAR
Amy A. Topor

ATTORNEY
Kathryn Festine

HIGHWAY SUPERINTENDENT
Sean Brady

Towing Rotation Application & Permit

Date _____

Name of Applicant _____
(Please print legibly)

Home Address _____

Name of Business _____

Business Address _____

Home Phone # _____ **Business Phone#** _____

- Do you have 24hr a day / 7 days per week towing service? ____ Yes ____ No
- Can you arrive at any requested location within 20 minutes when requested by the New York Mills Police? ____ Yes ____ No
- Do you have a secure facility? ____ Yes ____ No

Please list the vehicles proposed to be operated by the applicant if placed on the towing rotation list. Please list the year, make, model, type (regular or flatbed), VIN#, and plate #

1. _____

2. _____

3. _____

4. _____

5. _____

Towing Application Page 2

Please list your insurance carrier _____
Insurance Policy # _____
Amount of bodily Injury Ins. _____
Amount of Property Damage Insurance _____

Please include a copy of the following:

- ✓ Certificate of Liability Insurance listing the Village of New York Mills as Certificate Holder
- ✓ Copy of Business Certificate
- ✓ Copy of Drivers License for each driver
- ✓ Copy of Insurance Card for each vehicle listed
- ✓ Copy of Registration Card for each vehicle listed

I have received a copy of the New York Mills towing rotation law and agree that I will follow all of its requirements to remain active on the list. I also understand that this list will expire with each calendar year (midnight on 12/31). I also understand that there is a \$100 nonrefundable fee that is payable to the Village of New York Mills with completed application.

Applicant signature _____

Dated _____

Contact Person _____

Contact Number _____

Office Use Only

Applicants Name _____

Business Name _____

Contact Person _____

Contact Phone # _____

Date application received _____

Received by _____

Check off if attached to application:

_____ Certificate of Liability Insurance listing the Village of New York Mills as Certificate Holder

_____ Copy of Business Certificate

_____ Copy of Drivers License(s)

_____ Copy of Insurance Card for each vehicle listed

_____ Copy of Registration Card for each vehicle listed

Notes: