



TEXAS DEPARTMENT OF LICENSING AND REGULATION
PO Box 12157 ● Austin, Texas 78711-2157
(800) 803-9202 ● (512) 463-6599 ● FAX (512) 463-5984
www.tdlr.texas.gov ● cstowing@tdlr.texas.gov

TOW TRUCK COMPANY LICENSE APPLICATION INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. All information provided must be typed or printed in black ink. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper. Use a paperclip to fasten all pages together, with the check or money order on top. **Do not use staples.**

DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.

To expedite processing time, call (800) 803-9202 or (512) 463-6599 to register online using the TOOLS system.

1. BUSINESS NAME - Write the full name of your business to be registered (40 character maximum).
2. DOING BUSINESS AS (DBA) NAME - Write the full DBA name for your business.

What is a "Doing Business As" Name? A fictitious name (or assumed name, trade name or DBA name) is a business name that is different from your personal name, the names of your partners or the officially registered name of your LLC or corporation.

It's important to note that when you form a business, the legal name of the business defaults to the name of the person or entity that owns the business, unless you choose to rename it and register it as a DBA name.

For example, consider this scenario: John Smith sets up a painting business. Rather than operate under his own name, John instead chooses to name his business: "John Smith Painting". This name is considered an assumed name and John will need to register it with the appropriate local government agency.

Do I need a DBA name? A DBA is needed in the following scenarios:

- **Sole Proprietors or Partnerships** – If you wish to start a business under anything other than your real name, you'll need to register a DBA so that you can do business as another name.
 - **Existing Corporations or LLCs** – If your business is already set up and you want to do business under a name other than your existing corporation or LLC name, you will need to register a DBA.
3. TYPE OF OWNERSHIP - Check the box that shows how your business is organized.
 4. FEDERAL TAX ID NUMBER - Write the federal ID number that is used by your business. Information about Federal or Employer ID numbers can be found at: www.irs.gov/businesses.
 5. MAILING ADDRESS - Write your current mailing address. This is the address where we will send you mail. A post office box can be used.
 6. PHYSICAL LOCATION - Write the physical address of your business. Do not use a post office box.
 7. BUSINESS PHONE NUMBER - Write a telephone number, including the area code, where we can reach you during the day or where we can leave you a message.
 8. BUSINESS FAX NUMBER - Write a fax number, including the area code, where you can receive faxes.
 9. POINT OF CONTACT - Write the name, title, email address, and phone number of a person we can contact about this towing business. Please provide your email address so the department may email license information and required notices to you. Your email address is confidential pursuant to the Texas Public Information Act, and the department will not share it with the public.
 10. IS THIS A UNIFIED CARRIER REGISTERED COMPANY - Check YES or NO to indicate if this towing business is a Unified Carrier Registered Company. If YES, enter the USDOT number in the space provided.
 11. LEGAL AGENT - Write the name, phone number, and address for the legal agent if this tow company is not located in Texas.

12. INSURANCE - ALL INSURANCE FILING MUST BE SUBMITTED BY YOUR INSURANCE COMPANY THROUGH THE TEXAS OCCUPATIONS ONLINE LICENSING SYSTEM (TOOLS) AT WWW.TDLR.TEXAS.GOV/TOOLS/

Liability Insurance - Indicate if you will maintain \$300,000 or \$500,000 liability insurance by checking the appropriate box. If this tow company performs any incident management tows then \$500,000 in liability is required. If this tow company performs only private property tows or consent tows then \$300,000 in liability is required.

Cargo Insurance - \$50,000 per vehicle cargo insurance is required if tow company performs incident management tows and/or private property tows. Indicate if you will perform incident management or private property tows.

13. DRUG TESTING POLICY - Check whether you are using the TDLR Model Drug Testing policy. If you are a member of a TDLR approved drug consortium, or you are submitting a drug testing policy for TDLR approval. If you indicate that you are a member of a TDLR approved drug consortium or that you are submitting a drug testing policy for approval, TDLR must approve your drug testing policy before you can get an active license. You are required to submit a copy with your application.

14. FEES - Enter all fees that are attached to this form. Make one check payable to the Texas Department of Licensing and Regulation. Mail fees and paperwork to TDLR, PO Box 12157, Austin, TX 78711.

Application Fee: \$350

Tow Truck(s) Fee: \$75 X # of tow trucks (total obtained from attachment A)

15. SIGNATURE AND DATE - Carefully read the statement of applicant before signing and dating the application.

Appendix A and Appendix B must be completed and submitted with the application and fee.

SOCIAL SECURITY NUMBER – Social Security number disclosure is required by Section 231.302(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:

www.oag.state.tx.us/child/index or call (512) 460-6000 or (800) 252-8014.



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TOW TRUCK COMPANY LICENSE APPLICATION

Do Not Write Above This Line

**YOU MUST MEET ALL REQUIREMENTS WITHIN 12 MONTHS OF THE FILING DATE, OR THE APPLICATION WILL BE TERMINATED.
 APPLICATION FEE: SEE ITEM 14 (FEES ARE NON-REFUNDABLE)**

1. Business Name: (as it will appear on your license, 40 character limit)

2. Doing Business As (DBA) Name:

3. Type of Ownership: Sole Proprietorship Corporation Limited Partnership
 Limited Liability Company Limited Liability Partnership General Partnership

4. Federal Tax ID Number:

5. Mailing Address: (USED TO RECEIVE MAIL FROM TDLR) (A PO box is allowed for this address)

Number, Street Name, Suite Number/Apartment Number

 City _____ State _____ Zip Code _____

6. Physical Location: (A PO box is not allowed for this address)

Number, Street Name, Suite Number/Apartment Number

 City _____ State _____ Zip Code _____

<p>7. Business Phone Number: (_____) _____ <small>Area Code Phone Number</small></p>	<p>8. Business FAX Number: (_____) _____ <small>Area Code Phone Number</small></p>
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9. Point of Contact: (Print name)

Name: _____ **Title:** _____

Email Address: _____ **Phone Number:** (_____) _____
(Ex: Johndoe@aol.com) See instruction sheet for disclosure information Area Code Phone Number

10. Is this a Unified Carrier Registered Company? Yes No If YES, list your US DOT #:

11. Legal Agent: (Only required if company is not located in Texas)

Name: _____

Phone Number: (_____) _____
Area Code Phone Number

Mailing Address: _____
Number, Street Name, Suite Number City State Zip Code

12. INSURANCE

ALL FILINGS MUST BE SUBMITTED BY YOUR INSURANCE COMPANY THROUGH TDLR'S TEXAS OCCUPATIONS ONLINE LICENSING SYSTEM (TOOLS) AT WWW.TDLR.TEXAS.GOV/TOOLS/

Liability Insurance: (Check one)
 \$500,000 - If this tow company performs ANY incident management tows then \$500,000 in liability is required.
 \$300,000 - If this tow company performs ONLY private property tows or consent tows then \$300,000 in liability is required.

Cargo Insurance:
Does tow company have trucks that perform incident management tows or private property tows? Yes No
If YES, \$50,000 of cargo insurance per vehicle is required if tow company performs incident management tows and/private property tows.

13. DRUG TESTING POLICY

Check one: (if you are a member of a consortium or are using your own drug testing policy, you must attach a copy. Your license will not be approved unless your drug testing policy is approved)

- I am using TDLR's Model Drug Testing Policy;
- I am a member of a TDLR approved consortium (name of consortium: _____ consortium phone: _____); or
- I am submitting a drug testing policy for TDLR approval.

14. FEES

TOW COMPANY APPLICATION FEE	TOW TRUCK(S) PERMIT FEE (from Appendix A)	ALL FEES ARE NON-REFUNDABLE
\$350	\$75 X Number of Tow Trucks	TOTAL FEE

15. STATEMENT OF APPLICANT

By signing and submitting this application, I certify that information submitted on this and any attached forms is true and correct. I further certify that I will comply with all applicable provisions of the Texas Towing Act; Texas Occupations Code, Chapter 2308; Texas Occupations Code, Chapter 51; Texas Administrative Code, Chapter 60; the Towing Administrative Rules, Texas Administrative Code, Chapter 86; I understand that providing false information on this application may result in revocation and/or denial of the license I am requesting and the imposition of administrative penalties and sanctions.

Signature of Owner or Authorized Representative	Printed Name
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Title	Date Signed
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Appendix A: Tow Truck Information

- Enter required information for all tow trucks. Do not list trailers.
- For each tow truck indicate if it will be used to perform incident management (IM), private property (PP) or consent tows (CT) by entering IM, PP, or CT in the appropriate box. Tow trucks designated to perform IM tows can perform PP tows and CT tows. Tow trucks designated to perform PP tows can also perform CT tows. Tow truck designated to perform CT tows may only perform CT tows.
- For each tow truck indicate if it is equipped to tow light-duty (LD) or heavy duty (HD) vehicles according to manufacturer's guidelines by entering HD or LD in the appropriate box.
- For each tow truck indicate if the tow truck is a car hauler or not, by entering Y or YES and N for NO in the appropriate box.

TOW TRUCK INFORMATION

Make of Tow Truck	Unit #	Year	COMPLETE Vehicle Identification Number (VIN)	Type of Tow	Light Duty/Heavy Duty	Car Hauler
				IM/PP/CT	LD/HD	Y/N

TOW TRUCK PERMIT FEE

Enter the number of tow trucks used by this tow truck company, multiply that number by \$75 to get the Tow Truck Permit fee. Enter the Tow Truck fee on the Tow Truck Company application (item 14).
 Each tow truck will be registered for one year.

Number of Tow Trucks _____ X \$75 (1 year) = \$ _____



Appendix B: Criminal History Background Information

To be eligible for a Tow Company Certificate, all of the controlling persons of this Tow Company including owners, partners, principals, officers, and/or general managers must successfully pass a criminal background check.

You are required to provide detailed information, including name, title, and percentage of ownership for each of the following:

1. Each partner, if the company is a partnership;
2. Each corporate officer, including the president, secretary, and treasurer, principals, and other officer who own 10% or more or who own more than \$25,000 of the value of the business, if the company is a corporation;
3. Each owner; and
4. Any managers of the company, if managed by someone other than the owners.

QUESTIONS

1. Has any owner, partner, principal, corporate officer, operator, or manager for this company been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation? Yes No
If YES, each person with a history must complete and attach a Criminal History Questionnaire for each offense.

2. Has any owner, partner, principal, corporate officer, operator, or manager for this company ever have an occupational license, certification or registration suspended, revoked, or denied in any state? Yes No

If YES, attach a Disciplinary Action Questionnaire to this application. This does not include your driver license.

Name: _____
Last First Middle Initial
Title _____ Ownership % _____ Gender: Male Female
Social Security Number: _____ Date of Birth: _____ Phone: (____) _____
(See instruction sheet for disclosure information)

Name: _____
Last First Middle Initial
Title _____ Ownership % _____ Gender: Male Female
Social Security Number: _____ Date of Birth: _____ Phone: (____) _____
(See instruction sheet for disclosure information)

Name: _____
Last First Middle Initial
Title _____ Ownership % _____ Gender: Male Female
Social Security Number: _____ Date of Birth: _____ Phone: (____) _____
(See instruction sheet for disclosure information)