



# TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

## TOW COMPANY CONTROLLING PERSON AMENDMENT FORM 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.

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

- Use this form to amend or delete controlling persons associated with this company. Be sure to sign and date below.
- A tow company must provide information for all controlling persons. This includes all owners, partners, principals, corporate officers, operators or managers.
- To add or delete a controlling person, provide all information for that person below and check the appropriate box.

1. COMPANY CERTIFICATE NUMBER - Provide the license number of this business in the space provided.
2. CRIMINAL HISTORY - Check YES or NO to indicate if any added controlling person has been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation. If YES, each controlling person with convictions must complete and attach a [Criminal History Questionnaire \(PDF\)](#) for each offense.  
  
If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal evaluation, submit a [Criminal History Evaluation Letter \(PDF\)](#), a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, and a \$10 fee.
3. DISCIPLINARY ACTION HISTORY - Check YES or NO to indicate if any added controlling person had an occupational license, certification, or registration suspended, revoked, or denied in any state. If YES, each controlling person having an occupational license or registration suspended, revoked, or denied in any state must complete and attach a [Disciplinary Action Questionnaire \(PDF\)](#) for each action.
4. COMPLETE THE INFORMATION BELOW TO AMEND OR DELETE A CONTROLLING PERSON OF THIS COMPANY - Check the box to indicate if a controlling person is being amend or deleted. Provide the name, title, birth date, gender, percentage of ownership and social security number of the controlling person. 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](#) or call (512) 460-6000 or (800) 252-8014
5. SIGNATURE AND DATE - The owner or authorized representative must sign and date the form.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

Texas Department of Licensing and Regulation  
P.O. Box 12157  
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#) or reach Customer Service via [webform](#). The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 [in state only], (512)463-6599, Relay Texas-TDD: (800) 735-2989.



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## TOW COMPANY CONTROLLING PERSON AMENDMENT FORM

**DO NOT WRITE ABOVE THIS LINE**

### 1. Company certificate Number: \_\_\_\_\_

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.

### 2. Criminal History:

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.

### 3. Disciplinary History:

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.

### 4. COMPLETE THE INFORMATION BELOW TO AMEND OR DELETE A CONTROLLING PERSON OF THIS COMPANY

Check here if you are **AMENDING** this controlling person  Check here if you are **DELETING** this controlling person

Name: \_\_\_\_\_  
Last First Middle Initial

Title \_\_\_\_\_ Ownership% \_\_\_\_\_ Gender  Male  Female

Social Security Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(See instruction sheet for disclosure information)

Check here if you are **AMENDING** this controlling person  Check here if you are **DELETING** this controlling person

Name: \_\_\_\_\_  
Last First Middle

Title \_\_\_\_\_ Ownership% \_\_\_\_\_ Gender  Male  Female

Social Security Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(See instruction sheet for disclosure information)

### 5. Signature and Date

Signature of Owner or Authorized Representative \_\_\_\_\_

Date Signed \_\_\_\_\_