



APPLICATION FOR UNLIMITED WRECKER PERMIT

Applicant name: _____ Phone No.: _____

Address: _____ City: _____ State: _____ Zip: _____

Individual Partnership Corporation

DBA: _____

Name and address of all partners or corporate officers:

Number of wreckers applicant desires to operate: _____ (include VIN, state tow tag number and registration number):

VIN#: _____ State tow tag #: _____ Registration #: _____

VIN#: _____ State tow tag #: _____ Registration #: _____

VIN#: _____ State tow tag #: _____ Registration #: _____

VIN#: _____ State tow tag #: _____ Registration #: _____

Proof of financial responsibility: Yes No

Insurance company: _____

Policy number: _____ Agent: _____

Expiration date: _____

I authorize the Oak Ridge North Police Department to check the background of my company to include any criminal history checks, warrant checks and financial obligations that would interfere with my ability to perform.

Applicant signature: _____ Date: _____

For office use only

Fee: \$ 100 (each wrecker) Date paid: _____ RN #: _____

Permit number issued: _____ Date issued: _____ Issued by: _____

Comments/notes: _____

City of Oak Ridge North

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