Borough of Little Ferry Police Department Application for Rotational Towing List 215 – 217 Liberty St., Little Ferry NJ, 07643

Note:
All applicants must comply with the requirements set forth in Section 4-32 of the Borough Code
entitled "Tower and Wreckers".
Business Name:
Rucinace Addrace
Business phone(s):
Business phone(s):
Owner Name (list all with more than 10%; include name, residence, DOB, Social Security
Number, Driver License Number, business address & phone):
List two business references and phone numbers:
1)

The following information is required:

- List of employees (Name, Address, Driver's License Number, DOB, Social Security Number, Yes/No criminal record))
- List of vehicles (Year, Make, Model, Registration & State, Vehicle ID Number, Proof of inspection, type of emergency lighting)

Certification checklist:						
Towing can be provided within 15 minutes anywhere in the Borough						
	Business will be available for service 24 hours a day					
•	All fees will be abided by					
	age area with number of cars that					
	otage of the area is included with					
this application?		Yes No				
The state of the s	A Business Registration Certificate is included with this application? Tes					
 Proof of required insurance is incl 		Yes No				
	s proof of ownership or lease of the					
the vehicles to be utilized, is inclu	• •	Yes No				
	e is included with this application?	Yes No				
Signed Background Check Authori	zation Waiver for each employee					
is included with this application?	La de la companya de	Yes No				
 Signed Hold Harmless Agreement 	is included with this application?	Yes No				
application to be deemed complete. Only appropriate with the complete requirement placed on the list of approved towers. The applicant represents all statements in agree to comply) with the requirements to misrepresentation of any material fact meapplicant for placement on the rotational from said list.	ents set forth in the Ordinance and app derein are true and that they are in com thereof. The applicant understands that ay be sufficient grounds to refuse to ap	pliance (or tany prove the				
Applicant's Signature & Date	Print Name & Title	-				
Business Name	Business Address	-				
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The Governing Body shall either grant or deny approval for placement on the rotational towing
list. Complete applications shall be considered in the order that they are received.

Date application filed with Police Chief:				
New application?	☐ Yes	☐ No		
Date application compl	eted:			
Application Granted?	Yes	☐ No	Date:	
Police Chief Signature 8	k Date:			

AUTHORIZATION WAIVER

Name:	Date of Birth:
	Driver's License #
To Whom It May Concern:	
DEPARTMENT , to review my o	authorize you, the LITTLE FERRY POLICE criminal history to include juvenile, adult arrest or ense history. I also consent and give permission to copy
I hereby release you, your may result from furnishing the rec	organization, or others from liability or damage, which quested information.
Records Bureau and will be made	will be maintained by the Little Ferry Police Department e available upon demand. The information requested is y Police Department in processing my application.
	Signature:
	Date:

HOLD HARMLESS AGREEMENT (CONTRACTOR)

agree	s to make payment of all proper charges for
(Name of Contractor) labor or materials required and hereby agrees	s to release, indemnify and hold harmless
	•
the Borough of Little Ferry including their en	inployees, officers, agents and officials from
and against any loss, damage, liability, judgn	nent or demand including attorney fees and
defense costs which arise out of injuries to pe	ersons, including death, or damage to
property caused by that party, his employees	, agents, subcontractors or any other person
or persons.	
	pressly represents and warrants that he has
(Name of Contractor) complied with all the requirements concerning	ng insurance and contractual indemnification
and that, simultaneously herewith,	shall provide the
(No Borough of Little Ferry with an Insurance Po	ame of Contractor) blicy naming the Borough of Little Ferry as
an additional Insured providing general liabil	lity coverage including bodily injury and
property damages with minimum limits of lia	ability not less than \$1,000,000 each
occurrence. Additional limits and coverages	may be required depending on contract.
Signed this day of	, 2019 as the binding act in deed of
Name of Contractor	
	Authorized Signature
Witness	
	Print Authorized Name & Title