

CITY OF LA PORTE

APPLICATION FOR REPLACEMENT WRECKER

() Emergency Auto Wrecker Replacement Transfer Fee \$25.00 Per Vehicle
(Note: Transfer fee **can not** be Pro-Rated)

PERMIT EXPIRATION REMAINS DECEMBER 31ST OF CURRENT YEAR

Company Name Shown on Permit: _____

Applicant's Name: _____

Physical Address: _____

Mailing Address: _____

Telephone: _____

List Wrecker Change(s) Below:

Discontinued Wrecker:

Year	Make/Model	Motor/I.D. #	License #
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Replacement Wrecker:

Year	Make/Model	Motor/I.D. #	License #
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If new Wrecker is not owned by the Applicant, list vehicle owner's name and address:

1) _____
Name Address City/State/Zip

NOTE: If the wrecker is operated under the terms of a contract with some company other than the owner, a copy of the contract shall be attached to this application.

I hereby agree to obey the provisions of the city's rules and regulations, ordinances and statutes applicable to motor vehicles and understand that upon my failure to so obey such laws that my permit may be revoked or suspended without notice.

I hereby certify that all the statements contained in this application are true and correct to the best of my knowledge.

X _____ X _____
Individual Partner

X _____ X _____
Corporation President attested by Corporation Secretary***

***If Corporation, affix corporate seal to this application

SWORN AND SUBSCRIBED to before me, the undersigned authority, by the above named person, this the _____ day of _____, _____.

X _____
Notary Public for the State of Texas

FOR CITY USE ONLY

THE FOLLOWING IS REQUIRED BEFORE ANY EXISTING PERMIT IS RE-ISSUED:

_____ Certificate of Insurance with City shown as Certificate Holder & Wrecker identified
Combined Single Limit (CSL) Liability as follows:
\$300,000.00 - If Gross Vehicle Weight is 26,000 lbs. Or less
\$500,000.00 - If Gross Vehicle Weight is over 26,000 lbs.

_____ Tax Dept. confirmation that the Applicant has no outstanding Taxes

_____ Accounting confirmation that the Applicant has no outstanding indebtedness

_____ Receive LP Police Department Wrecker Inspection Memo
(Applies to Emergency Auto Wrecker Permit Only)

Permit No. Re-issued: _____

Date Issued: _____

Fee Collected: _____

Receipt Number: _____

Clerk Initials: _____

City Secretary Provided with Copy of Permit/License: _____
Date Clerk Initials

Police Dept. Provided with Copy of Permit/License: _____
Date Clerk Initials

Revision: 07/24/2007