



TEXAS DEPARTMENT OF LICENSING AND REGULATION

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

1-800-299-1700 - FAX (512) 463-5984

www.license.state.tx.us - towing@license.state.tx.us

TOW TRUCK COMPANY REACTIVATION APPLICATION

PURSUANT TO TEXAS OCCUPATIONS CODE, CHAPTER 2308

DO NOT WRITE IN THE FEE AREA IMMEDIATELY BELOW

RECEIPT NUMBER	PMT. AMOUNT	MONEY TYPE

DO NOT WRITE IN THE FEE AREA IMMEDIATELY ABOVE

1. Name of Tow Truck Company: _____ DBA: _____

2. Have you been registered as a Tow Truck Co before? Yes No If yes, list certificate number. _____

3. Physical Location: STREET ADDRESS MUST BE DESIGNATED BELOW. (A license will not be issued to a P.O. Box.)

Number, Street, Suite No., Apt. No. _____ City _____ State _____ Zip _____

4. Mailing Address : (USED FOR ALL CORRESPONDENCE) (P.O. Box is allowed for this address.)

Number, Street, Suite No., Apt. No. _____ City _____ State _____ Zip _____

5. Business Phone: () - 6.Fax: () -

7. SS # (required if Sole Proprietor): 8. Email Address:

9. Type of Ownership: Corporate Partnership Sole Proprietor Other _____

10. Company Owner, Partners, or Corporate Officers (attach additional sheet if necessary)

Name and Title _____ Name and Title _____

Name and Title _____ Name and Title _____

11. Legal Agent's Name: _____ Phone: () -

Street Address _____ City _____ State _____ Zip _____

12. Do you belong to a drug-testing consortium? Yes No

13. Persons Operating Consortium

Name _____ Name and Title _____

Insurance Requirements: ALL INSURANCE FILINGS MUST BE SUBMITTED BY YOUR INSURANCE COMPANY THROUGH THE TEXAS ONLINE OCCUPATIONS LICENSING SYSTEM AT WWW.LICENSE.STATE.TX.US/TOOLS/.

14. Cargo Insurance
\$50,000 per vehicle Cargo Insurance is required if TT Company performs nonconsent tows.

Does Carrier Perform Nonconsent Tows? Yes No

15. Liability Insurance
If gross weight, registered weight or gross weight rating of 26,000 pounds or less then \$300,000 in liability insurance is required.

If gross weight, registered weight or gross weight rating over 26,000 pounds then \$500,000 in liability insurance is required.
 \$300,000 OR \$500,000 in Liability

16. FEES

LIABILITY INS. FEE	CARGO INS. FEE (required if performing nonconsent tows)	TOW TRUCK(S) FEE (from Appendix A)	Total Fees
\$100	\$100	\$25 X # of Trucks	

17. By signing and submitting this application, I certify that the information provided on this form is true and correct, that I am authorized to execute and file this document on behalf of the applicant and that the applicant (1) is in compliance with the drug testing requirements contained in 49 C.F.R. Part 382; (2) has knowledge of, and will conduct operations in accordance with, applicable federal and state laws and rules relating to motor carrier safety, including Texas Transportation Code, Chapter 541-600, 643, and 644; and (3) has the required insurance as set forth in 43 TAC § 18.16

Signature of Owner, Partner, Officer or Authorized Agent

Printed Name

Title

Date



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Appendix A: Reactivation Tow Truck Report

INSTRUCTIONS	• Type or print legibly in blue or black ink.	• Do not list trailers.
	• Enter required information on all Tow Trucks.	• If additional space is needed, please attach a copy of Appendix

A. Name of Tow Truck Company: _____ DBA: _____

B. Physical Location: STREET ADDRESS MUST BE DESIGNATED BELOW.

Number, Street, Suite No., Apt. No. _____ City _____ State _____ Zip _____

C. TOW TRUCK INFORMATION

Make of Tow Truck	Unit Number	Year	COMPLETE Vehicle Identification Number (VIN)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

D. Tow Truck Fee

Enter the number of tow trucks associated with this tow truck company, multiply that number by \$25 to get the Tow Truck fee. Enter the Tow Truck fee on the Tow Truck Company application. Each tow truck will be registered for one year.

Number of Tow Trucks _____ X \$25 (1 year) = \$ _____