

VEHICLE INFORMATION:

THIS MUST BE KEPT CURRENT. THE SANGAMON COUNTY SHERIFF'S OFFICE MUST BE NOTIFIED OF ANY CHANGES.

MAKE	YEAR	WEIGHT CAPACITY	WINCHING Y/N	DOLLIES Y/N	FLAT BED Y/N

TOW CHARGE INFORMATION:

MINIMUM: \$ _____ MAXIMUM: \$ _____ PER CALL/MILE: \$ _____

DO YOU ACCEPT CREDIT CARDS OR AUTO CLUBS (CIRCLE ONE) YES NO

IF SO, WHICH ONES: _____

ANY CHANGES IN THE ABOVE RATES SHALL BE REPORTED TO THE SHERIFF'S OFFICE.

STORAGE CHARGE INFORMATION:

INSIDE: \$ _____ OUTSIDE \$ _____

LOCATION OF STORAGE: _____

INSURANCE INFORMATION:

INSURANCE COMPANY NAME: _____

POLICY #: _____

AGENT: _____ TELEPHONE: _____

LIABILITY: \$ _____ PROPERTY DAMAGE: \$ _____

A COPY OF YOUR INSURANCE POLICY MUST ACCOMPANY THIS APPLICATION.

PLEASE NOTE: THIS IS NOT A CONTRACT, EXCLUSIVE OR OTHERWISE. THIS QUESTIONNAIRE MUST BE FILLED OUT COMPLETELY. USE REVERSE SIDE FOR ANY ADDITIONAL INFORMATION.

THE SHERIFF RESERVES THE RIGHT TO REMOVE ANY COMPANY FROM THE TOW LIST WITHOUT CAUSE.

SIGNATURE AND TITLE OF INDIVIDUAL COMPLETING THIS FORM:

FOR SHERIFF'S OFFICE USE ONLY:

ACCEPTED _____

REJECTED _____

REASON FOR REJECTION: _____

BY: _____ SIGNATURE: _____

SCSO #361
REVISED 10/19

DRIVER REQUIREMENTS – INCLUDES OWNER:

1. Appropriate license to cover size of trucks being driven.
2. Adequate experience necessary to properly operate towing vehicle.
3. Compliance with all State and Federal laws when driving a tow truck.
4. No criminal conviction within the past five (5) years. Arrests or convictions for any criminal offense may result in immediate removal from our tow list.

PENALTY:

Violations of above requirements will be grounds for removal from towing lists of the Sangamon County Sheriff's Office, at the discretion of the Sangamon County Sheriff's Office.

DIRECT QUESTIONS TO:

Captain of Operations
753-6859

Signed: _____

Date: _____

Towing Company: _____