

**BOROUGH OF SAYREVILLE  
SAYREVILLE, NEW JERSEY**

**APPLICATION FOR WRECKER OWNER'S LICENSE**

(Fee Ordinance #69-08)

New Applicant Fee: \$275.00  
Renewal: \$225.00  
Vehicle inspection fees: \$25.00 per vehicle  
Late Fees: \$20.00 30 Days Late  
\$35.00 60 Days Late  
\$60.00 90 Days Late

YEAR: \_\_\_\_\_

1. LEGAL NAME OF APPLICANT: \_\_\_\_\_
2. TRADE NAME: \_\_\_\_\_
3. HOME ADDRESS OF APPLICANT: \_\_\_\_\_
4. BUSINESS ADDRESS: \_\_\_\_\_
5. HOME TELEPHONE # \_\_\_\_\_
6. BUSINESS TELEPHONE # \_\_\_\_\_
7. APPLICANT'S PRINCIPAL OFFICE IS LOCATED WITHIN THE STATE OF NEW JERSEY (CIRCLE ONE) YES / NO
8. APPLICANT HAS AT LEAST THREE (3) YEARS EXPERIENCE OF PROVIDING PROPERLY INSURED TOWING SERVICES TO THE GENERAL PUBLIC (CIRCLE ONE) YES / NO
9. APPLICANT HAS A BUSINESS LOCATION WITHIN THE BOROUGH OF SAYREVILLE ON WHICH THERE IS SITUATED A GARAGE AND A SECURED VEHICLE STORAGE AREA WHICH IS CONTAINED WITHIN AN ENCLOSED BUILDING AND/OR WITHIN AN OUTSIDE AREA WHICH IS SURROUNDED BY A CHAIN LINK, STOCKADE OR OTHER SUCH TYPE OF RESTRICTIVE FENCING WHICH IS AT LEAST SIX (6') FEET IN HEIGHT (CIRCLE ONE) YES / NO

10. HAVE YOU EVER BEEN CONVICTED OF ANY OFFENSE AGAINST THE LAWS OF STATE ? (CIRCLE ONE) YES / NO

If yes, give details:

Where arrested: \_\_\_\_\_  
(City) (State)

Nature of arrest: \_\_\_\_\_

Disposition and date: \_\_\_\_\_

11. HAVE YOU EVER BEEN DENIED A LICENSE OR PERMIT TO OPERATE A MOTOR VEHICLE OR A TOWING SERVICE ? (CIRCLE ONE) YES / NO

12. NUMBER OF WRECKER LICENSES APPLIED FOR : LIGHT DUTY \_\_\_\_\_

HEAVY DUTY \_\_\_\_\_

13. DESCRIPTION OF VEHICLE(S) TO BE LICENSED:

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Type: \_\_\_\_\_

Serial # \_\_\_\_\_

State Registration # \_\_\_\_\_

Motor Capacity \_\_\_\_\_

Make & Type of Crane \_\_\_\_\_

Length of time vehicle has been used as a wrecker \_\_\_\_\_

14. DO YOU OWN OR LEASE THE WRECKERS THAT YOU ARE SEEKING TO LICENSE?  
(Circle one) Own      Lease

If leased, list owner's name & address \_\_\_\_\_  
\_\_\_\_\_

15. ARE YOU IN THE AUTO BODY REPAIR BUSINESS? (circle one) YES    NO

16. DO YOU PROVIDE N.J. STATE INSPECTION SERVICES? (Circle one) YES    NO

17. INSURANCE REQUIREMENTS:

a. Insurance Company \_\_\_\_\_

b. Address \_\_\_\_\_  
\_\_\_\_\_

c. Policy # \_\_\_\_\_

d. Expiration date: \_\_\_\_\_

18. ATTACH TO THIS PAGE, A CERTIFICATE OF INSURANCE SPECIFICALLY NAMING THE BOROUGH OF SAYREVILLE AS AN ADDITIONAL INSURED.

CORPORATIONS ONLY

IF APPLICANT IS A CORPORATION, PLEASE COMPLETE THE FOLLOWING FOR EVERY PERSON OWNING TEN PERCENT (10%) OR MORE OF SAID CORPORATION:  
(Use additional sheets, if necessary)

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_  
\_\_\_\_\_

HOME TELEPHONE NO \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF ANY OFFENSE AGAINST THE LAWS OF STATE?  
(Circle one) YES NO

If yes, give details:

Where Arrested: (City) \_\_\_\_\_ (State) \_\_\_\_\_

Nature of arrest: \_\_\_\_\_

Disposition and date: \_\_\_\_\_

HAVE YOU EVER BEEN DENIED A LICENSE OR PERMIT TO OPERATE A MOTOR VEHICLE OR A TOWING SERVICE? (Circle one) YES NO

If yes, give details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_