



**HOBOKEN DEPARTMENT OF TRANSPORTATION & PARKING**  
94 Washington Street | Hoboken | New Jersey | 07030 | 201.653.1919 | www.hobokennj.org

**Application for CY2012 Towing Service License**  
**NOTE: DUE DATE FOR APPLICATION IS 15 NOVEMBER 2011**

----- FOR HPU OFFICE USE ONLY -----

Date Received: \_\_\_\_\_ Administrative Fee Received: \_\_\_\_\_

Pending Application #: R - \_\_\_\_\_ Evaluation Code: \_\_\_\_\_

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**General Instructions:**

1. **PRIOR TO SUBMITTING THIS APPLICATION, YOU MUST THOROUGHLY READ AND UNDERSTAND ALL REQUIREMENTS OF HOBOKEN CITY CODE CHAPTER 184 "TOWING".**
2. **Complete this application in its entirety, including providing all required attachments.**
3. **Use "N/A" where necessary, DO NOT LEAVE ANY BLANKS.**
4. **Incomplete applications and not providing all required attachments will render the applicant unqualified for annual license.**
5. **Print or type all answers in ink. Do not use pencil.**
6. **Ensure application is signed/dated by the appropriate individual and notarized by a currently licensed notary public.**
7. **Include a check/money order made payable to "Hoboken Parking Utility". You may also pay by credit card.**
8. **Additional information may be requested after receipt of and review of the application and its attachments.**
9. **It is the applicant's responsibility to retain a copy for their records.**
10. **Ensure that the responsible individual can be easily reached and is readily available via the contact information provided.**
11. **SUBMIT COMPLETED APPLICATION WITH ALL ATTACHMENTS AND PAYMENT TO THE HOBOKEN PARKING UTILITY CUSTOMER SERVICE WINDOW, GROUND FLOOR, HOBOKEN CITY HALL.**

**LICENSE TYPE (check all that apply):**

Light Duty (GVW 7,500 pounds or less)       Heavy Duty (GVW greater than 7,500 pounds)

**BUSINESS INFORMATION:**

Name of Business: \_\_\_\_\_  
(As it should appear on the license if approved)

Trading As: \_\_\_\_\_  
(Includes any fictitious names, dba names, etc. – attach a separate page if necessary)

Physical Address of Business: \_\_\_\_\_  
City, State & Zip Code \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_  
City, State & Zip Code \_\_\_\_\_

Email Address (print clearly): \_\_\_\_\_

Business Telephone #: \_\_\_\_\_ Business Facsimile #: \_\_\_\_\_

Mobile Phone #1: \_\_\_\_\_ Mobile Phone #2: \_\_\_\_\_

Dawn Zimmer  
Mayor

Ian Sacs, P.E.  
Director

**Taxpayer Identification Number (enter either Federal Employer Identification or Social Security #):**

\_\_\_\_\_ -- \_\_\_\_\_

**List the street addresses for ALL other facilities and offices to be used under this license (attach a separate page if necessary):**

- (a) \_\_\_\_\_
- (b) \_\_\_\_\_
- (c) \_\_\_\_\_

**Provide the full name of the Responsible Individual for this towing service, their Social Security Number, and a telephone number where they can be easily reached. The Responsible Individual is the person representing the business and is accountable for all aspects of the license for the operator. The Responsible Individual must be knowledgeable of all applicable federal, state, county, and local laws and regulations related to the tow and recovery services the license offers and renders, and for ensuring that the operator conforms to them. The Responsible Individual is either the principal owner or chief executive officer of the business entity, or manager of business operations for the operator. Additionally, they should be readily available and able to timely respond to any and all inquiries from the City.**

**Responsible Individual's Full Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **SS#:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Contact Phone #1:** \_\_\_\_\_ **Contact Phone #2:** \_\_\_\_\_

**List the name of the Principal Owner (if more than one Principal Owner, list all) and all other individuals involved in the management and operation of the business. For example, the sole proprietor, partners of a general partnership, managing partner of a limited partnership, officers/directors of an association, managers/members of a limited liability company, or officers and shareholders (holding over 10% of the shares) of a corporation (attach a separate list if necessary).**

Individual's Full Legal Name	Title	SS#
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**APPLICANT AFFIRMATIONS:**

<i>Instructions: Responsible Individual shall <u>initial</u> each affirmation to the right →</i>	Yes	No
1. Does the applicant’s business have a current or expired towing or recovery license, certification or registration? <i>If yes, provide copies of the most recent license(s), certification(s), and/or registration(s).</i>	_____	_____
2. Does the Responsible Individual or Principal Owner have a current or expiring towing or recovery license, certification, or registration in another state? <i>If yes, provide copies of this most recent license(s), certification(s), or registration(s).</i>	_____	_____
3. Has any local, county, State of New Jersey, or other state or national regulatory body subjected the applicant, the Responsible Individual, or the Principal Owner to any disciplinary actions taken against it in any administrative, civil, or criminal proceeding related to the operation, management, or conduct of services provided by the applicant? <i>If yes, provide copies of the findings and identify the entity.</i>	_____	_____
4. Has any local, county, State of New Jersey, or other state or national regulatory body subjected the applicant, the Responsible Individual, or the Principal Owner to suspension or revocation of any license or certification? <i>If yes, provide copies of the findings and identify the entity.</i>	_____	_____
5. Has the owner, manager, or any other individual involved in the operation, management, or conduct of the business, including the Responsible Individual, ever been convicted of any misdemeanor criminal offense? <i>If yes, provide certified copy of the applicable warrants.</i>	_____	_____
6. Has the owner, manager, or any other individual involved in the operation, management, or conduct of the business, including the Responsible Individual, ever been convicted of any felony criminal offense? <i>If yes, identify the individual(s) separate list attached to this application and provide a certified copy of the applicable warrants, a national criminal history record check for each person, and any other information that you would like the City to consider including status of incarceration, parole or probation, reference letters, etc.</i>	_____	_____
7. Does the Responsible Individual understand that all towing service licensees must comply with all local licensing requirements per Hoboken City Code Chapter 184?	_____	_____
8. Does the Responsible Individual understand that each and every driver employed or contracted by towing services licensees to drive tow trucks, must have a current and valid driver’s licenses applicable for operation of tow trucks at all times? <i>Include a separate list attached to this application entitle “List of Drivers” of all drivers, including driver count, valid driver’s license number and expiration date, State of issuance, and total number of drivers at bottom of list. Also include copy of driver’s licenses (front and back) for each driver on the list.</i>	_____	_____
9. Does the Responsible Individual understand that each and every vehicle/equipment utilized or contracted by the towing services licensee must have current and valid registration and insurance for operation of said vehicle(s) at all times? <i>Include a separate list attached to this application entitled “List of Vehicles” of all vehicles, including vehicle count, vehicle fleet #, VIN #, license plate #, registration expiration date, state of issuance, and total number of trucks at bottom of list. Also include copies of vehicle</i>	_____	_____

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Director

*registration and insurance card for each vehicle on the list.*

- 10. Does the Responsible Individual understand that proof of ownership or similar property rights for any and all storage sites is required to demonstrate control over the site? *Include proof of ownership or similar property rights for any and all storage sites as an attachment to this application.* \_\_\_\_\_
- 11. Does the Responsible Individual understand that a final certificate of zoning compliance and a certificate of occupancy are required to demonstrate that the proposed use on the site complies with all zoning and building codes? *Include final certificate of zoning compliance AND certificate of occupancy as an attachment to this application.* \_\_\_\_\_
- 12. Does the Responsible Individual understand that insurance at or above the requirements described in N.J.S.A. 56:13-12 is required? *Include proof of insurance as an attachment to this application.* \_\_\_\_\_
- 13. Does the Responsible Individual understand that evidence of ownership or leasehold of at least one flat bed and one wheel lifts is required? *Include evidence as an attachment to this application.* \_\_\_\_\_
- 14. Does the Responsible Individual understand that a statement of corporate ownership and a stockholder disclosure statement are required? *Include statements as an attachment to this application.* \_\_\_\_\_
- 15. Does the Responsible Individual understand that a list of all customer service representatives employed by the entity is required? *Include a separate list to this application entitled "List of Customer Service Representatives", including name, title, and confirmation that individual is legally authorized to work in the United States.* \_\_\_\_\_
- 16. Does the Responsible Individual certify that all internal software systems used for towing services must be internet capable and that the applicant is willing, at their own cost and expense, to purchase and utilize software which is compatible with the City's towing software system? \_\_\_\_\_
- 17. Does the Responsible Individual certify that the storage site must be operated in accordance with the regular business hours and after-hours required by the Director, which are provided to licensee upon application approval? \_\_\_\_\_
- 18. Does the Responsible Individual certify to agree to provide towing services twenty-four hours a day, seven days a week, three hundred sixty five days a year, within fifteen minutes of being summoned? \_\_\_\_\_
- 19. Does the Responsible Individual certify that all requirements listed in City Code Chapter 184-5:A-13 will be maintained during the term of the license? \_\_\_\_\_
- 20. Does the Responsible Individual certify that no sworn member of the City of Hoboken Police Department owns greater than ten percent (10%) of any towing service licensed by the City? \_\_\_\_\_
- 21. Has the Responsible Individual included the Administrative Fee: \$1,000.00? \_\_\_\_\_

**CERTIFICATION BY THE RESPONSIBLE INDIVIDUAL:**

I, the undersigned, hereby certify that the statements, answers, and documents provided herein are true, and I have not suppressed any information that might affect the City’s decision to approve this application. I certify that I will notify the City if the business, the Responsible Individual, or any other individual involved in the operation, management or conduct of the business are subject to any disciplinary action, or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to the receipt of a requested license. I certify that I am a principal owner and/or chief executive of the applicant, and am authorized to bind the applicant to contracts and other legal obligations. I also certify that I understand, have complied with, and will comply with, all of the laws of the United States of America, State of New Jersey, County of Hudson, and City of Hoboken, related to towing and recovery licensure under the provisions of N.J.S.A. 56-13 and any other applicable laws and regulations

Responsible Individual’s Printed Full Name: \_\_\_\_\_

Responsible Individual’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF NEW JERSEY, COUNTY OF \_\_\_\_\_, ss:

On \_\_\_\_\_, 2011 before me personally appeared \_\_\_\_\_, to me known and known to me to be the person described in and who executed the foregoing instrument, and s/he duly acknowledged to me that s/he understood and executed the same.

\_\_\_\_\_  
Notary Public

(Seal of Notary Public)

**FEE SCHEDULE:**

License Application Fee: \$1,000.00 per license per year

Truck Decal Fee: \$10.00 per truck

**CALCULATION OF TOTAL FEES DUE:**

License Application Fee: \$1,000.00

Truck Decal Fee (Total number of trucks multiplied by \$10.00): \_\_\_\_\_

Total Fee Due: \_\_\_\_\_

**PAYMENT OPTIONS:**

1. Check or money order made payable to “Hoboken Parking Utility”
2. Credit Card. By completing this section, you authorize the Hoboken Parking Utility to process the Total Fees Due via the credit card information provided.

Payable Amount: \_\_\_\_\_ Credit Card Type: \_\_\_\_\_

Care Verification Code: \_\_\_\_\_ Card Expiration Date: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Cardholder Printed Name: \_\_\_\_\_

Cardholder Address: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

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**Reviewer Name:** \_\_\_\_\_ **Review Date:** \_\_\_\_\_

**Choose One:**

Application is complete with all required information and attachments

Application is NOT complete and the applicant has been notified by:

Certified Letter  Email  Phone Call/Voice Mail

Date of Notification: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Other (Please describe): \_\_\_\_\_

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**Final Determination:**

Application Determination:  APPROVED  DENIED

Towing Service License Number Issued: \_T-\_\_\_\_\_

Notification:  Certified Letter  Email  Phone Call/Voice Mail

Date of Notification: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Other (Please describe): \_\_\_\_\_

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Reviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Approval: \_\_\_\_\_ Date: \_\_\_\_\_