42 Broadway
Lobby
New York, NY 10004

**Dial 311
(212-NEW-YORK)**

nyc.gov/consumers

TOW TRUCK RENEWAL APPLICATION SUPPLEMENT

Business Name:	
Doing-Business-As (DBA) or Assumed Name:	
Business Address (*No P.O. Boxes*):	
Business Contact Name:	
Telephone Number:	
Fax Number:	
E-mail Address:	

You must answer all questions completely. Failure to provide truthful and/or complete answers and applicable supporting documentation may result in denial of your application and/or enforcement action.

Reminder: If any information has changed (e.g., change of officer, address, business name, etc.), please call the Special Applications Unit for further instructions at (212) 487-4157 or (212) 487-2353. You must complete required Change of Information forms.

Please refer to this Key to answer questions:

- **"Applicant"** means any corporation, partnership, or sole proprietor applying for a license.
- **"Person"** means any officer, owner, director, stockholder with an interest of 10% or more; partner; or any individual with a beneficial interest in the applicant.
- **"Beneficial Interest"** means profit, benefit, or advantage resulting from a business regardless of whether the individuals who enjoy such profit, benefit, or advantage hold formal ownership or title in the applicant's business.

If you answer "Yes" for any of the questions, please provide requested description. If you need more space, attach additional papers as necessary. Also attach any supporting documentation.

1. Are there any other businesses operating at this business address? ☐ Yes ☐ No
   If Yes, please complete the information below.

Business Name	Business Type	DCA License Number (if applicable)

2. Provide information on *all* general partners and *all* corporate officers and *each* shareholder owning 10% or more of the business. Note: Limited Liability Companies must provide information on *all* members.[1]

Last and First Names	Social Security or Individual Taxpayer Identification Number	Home Address	Title	% Stock

3. Since your last license was issued, has any employee been convicted of or charged with any criminal offense which was related to an incident which occurred on the licensee's premises or in the course of the licensee's business? ☐ Yes ☐ No
   If Yes, please provide a description of the crime, offense, or violation. NOTE: Description should include the date of conviction, the nature of the incident, persons involved, and the outcome.

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[1] Providing Social Security or Individual Taxpayer Identification numbers is voluntary. The City requests this information under the NYC Charter and Administrative Code. This information will or may be used to allow the City of New York to maintain and update City databases, to carry out the powers and duties of the Department, and for other purposes necessary to promote the general welfare.

4. Does any individual listed in "2" or "3" hold a beneficial interest in any other tow truck company or companies? ☐ Yes ☐ No
   If Yes, provide the information below.

Individual's Name	Name of Other Tow Truck Company	Address	DCA License Number

5. Does any individual listed in "2" or "3" have a beneficial interest in any automobile repair shop(s) or body shop(s)? ☐ Yes ☐ No
   If Yes, please provide the information below.

Name of Facility:		
DMV Permit:	License Number:	Name of Individual:
Please enter the Federal Employer Identification Number (EIN):		
If you do not have an EIN, enter individual's Social Security Number:		
Enter the New York State Sales Tax Identification Number from the Certificate of Authority:		

6. My business is a participant in the following program(s):
   ☐ Direct Accident Response Program (DARP)
   ☐ Rotation Tow Program (ROTOW)
   ☐ None of the above

   If your company is in the DARP or ROTOW programs and you store towed vehicles at an additional location, please provide the address of the additional storage location below.

Corporation Name/Business Name:
Doing-Business-As (DBA) or Assumed Name:
Business Address (*No P.O. Boxes*):

I understand that falsification of any statement made herein is an offense punishable by a fine or imprisonment or both.

_____ _____ _____
Signature   *Print Name and Title*   *Date*