



Township of Essa  
**SUPPLEMENTAL TOW TRUCK APPLICATION FORM**

Please note one application must be submitted per vehicle.

Registered Name of Business: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Business Phone Number: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

**Owner Information** *If not the applicant*

Name of Property Owner \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

**Vehicle Information**

Year [ ] Make [ ] Model [ ]

Color [ ] Odometer Reading [ ] kms

- Attachments to be provided with the application:
- Valid Vehicle Safety Standards Certificate (dated within ten months of application)
  - Motor vehicle liability insurance card
  - Ontario Vehicle Registration
  - Certificate of insurance for a minimum of \$2 million dollars showing the Township as additionally insured for the company, and proof of insurance for the vehicle.

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, do hereby confirm that I am aware of and accept the conditions set out with respect to the issuance of this license and agree to the terms of the license and of By-law 2011-20, of the Township of Essa, concerning the business licensed herewith. I further hereby indemnify and save harmless the Township of Essa, its Committees and employees, from any and all claims arising out of the business activity authorized by this license.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Issuer of Licenses

\_\_\_\_\_  
 Signature of Registered Vehicle Owner