



TOW CAR BUSINESS BMC 5.20 (Ord. 648; 783; 1022)

Required Prior to Filing:

- Active or Pending Conditional Use Permit

Applicant Requirements

- Business License Application (If denied, processing fee non-refunded)
- Zone Clearance Form, if applicable
- Fingerprinting (Approximately \$60.00 per person and non-refundable)
- Insurance Requirements:
 - Bodily injury and property damage with a combined single limit of five hundred thousand dollars (\$500,000.00)
 - Uninsured motorists' insurance with a minimum limit of thirty thousand dollars (30,000.00) combined single limit.
- Certified Copies of all current Tow Agreements, if applicable

Required Approval(s):

- Planning Department*
- Code Enforcement*
- Sheriff Department*

*Obtained by the City of Bellflower

Permit Renewal:

Annual (Permits valid for two years from date of issuance)

Add Tow Car Business Assistant to Existing Permit BMC 5.20

Applicant Requirements

- Application to Add Applicant to Existing Permit (non-refundable)
- Two (2) 1x1 photos taken within 60 days

Required Approval(s):

- Sheriff Department*

*Obtained by the City of Bellflower

Permit Renewal:

Annual (Permits valid for two years from date of issuance)



APPLICATION FOR TOW CAR BUSINESS (BMC 5.20)

BMC 5.20 This towing ordinance applies to any and all tow services operating in the City whether or not they have an established office or storage yard within the City. Tow services are deemed to be operating in the City if they tow a vehicle from any location within the City to any other location or conduct any activity under paragraph "a" of the definitions within the City. An act, omission, or failure by any agent or employee is the act, omission, or failure of the employing corporation or individual.

• Please complete the required information:

Business Name: _____ Phone: _____

Address: _____

List any other names under which the business operates: _____

• Owner Information:

Owner: _____ Phone: _____

Address: _____

• If applicable, attach the names of the partners or the persons comprising the association or company with the place of business and residence of each such partner or person.

Federal ID Number: _____

State of Incorporation: _____

State ID Number: _____

Type of Entity:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corp- Ltd Liability | <input type="checkbox"/> Sole Proprietor |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Ltd Liability Partnership |
| <input type="checkbox"/> Other: | | |

• Applicant Information:

Applicant: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Social Security No.: _____ Citizenship: _____

Drivers License No.	Gender	Hair	Eyes	Height	Weight

• P.O. Box is not permissible

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• **Applicant Information (Cont.):**

Have you ever been convicted of any crime as a result of an arrest, citation or criminal complaint (Do not include traffic infractions)? Include any convictions expunged via 1203.4 PC. Yes No

If yes, please explain in detail: _____

• **Previous Tow Car Background:**

In the last five (5) years, complete the required information in which the applicant has worked for or employed by a Tow Car Business.

Business Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

• **Required Vehicle Information:**

1. Vehicle Year, Make & Model: _____

License Plate: _____

Registered Owner: _____

Legal Owner: _____

2. Vehicle Year, Make & Model: _____

License Plate: _____

Registered Owner: _____

Legal Owner: _____

• **Required Vehicle Information (Cont.):**

3. Vehicle Year, Make & Model: _____

License Plate: _____

Registered Owner: _____

Legal Owner: _____

4. Vehicle Year, Make & Model: _____

License Plate: _____

Registered Owner: _____

Legal Owner: _____

List each person the applicant proposes to use or will use as a Tow Car Business Assistant within the City and attach a separate application for each:

Name

1. _____

2. _____

3. _____

4. _____

5. _____

• **Additional Information Required to be submitted with application:**

Proof of Insurance. (Bodily Injury and Property Damage with a combined single limit of Five Hundred thousand (\$500,000) dollars, Uninsured Motorists' with a minimum of Thirty thousand (\$30,000) dollars, and the City of Bellflower named as additional insured.)

Completed Permit application for each Tow Car Business Assistant, fee waived for those individuals listed in initial application.

Certified copies of all current Tow Agreements. (Submitted annually with Business License Renewal.)

Completed Business License Application with required fees.

Completed Zone Clearance Form. (If applicable, to accompany Business License Application)

Photo of all Tow Car Business Assistants listed above.

Obtain fingerprints from Sheriff's Department

Applicant Signature _____

***Business License Processing Fee (Approximately \$53.00, non-refundable)**

***Business License Fee (Refundable if denied)**

***Fingerprint (Approximately \$60.00 per person and non-refundable)**

For Internal Use:

Date Received: _____ By: _____

Receipt #: _____ Amount: _____



APPLICATION TO ADD APPLICANTS TO EXISTING PERMIT (BMC 5.20, 5.44, 5.48)

• **Please select permit type:**

- | | |
|--|--|
| <input type="checkbox"/> Tow Car Business Assistant
(BMC 5-20 Complete Sections A, B, E.) | <input type="checkbox"/> Other Vehicles for Hire (BMC
5-44 Complete Sections A, C, E) |
| <input type="checkbox"/> Taxi Operator (BMC 5-44) (a)
Complete Sections A, C, E) | <input type="checkbox"/> Patrolman (BMC 5.48
Complete Sections A, D, E) |

• **Section A – All Applicants:**

Business Name: _____ Phone: _____

Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Social Security No: _____ Citizenship: _____

Drivers License No.	Gender	Hair	Eyes	Height	Weight

*P.O. Box is not permissible

• **Section B – Tow Car Business Assistant**

BMC 5-20 Tow Car Business Assistant. All persons hired as a low car business assistant will immediately apply for a tow car business assistant permit from the City.

• **Section C- Taxi Operator or Other Vehicles for Hire:**

BMC 5-48 Required. It shall be unlawful for any driver to operate or driver any taxicab or vehicle for hire unless the owner thereof has obtained a taxicab owner's or other vehicle for hire permit.

Marital Status:

- Single Married Separated Divorced

Vehicle Information:

Vehicle Make, Model & Color: _____

Name of Vehicle Owner: _____

Required information continued on next page.

• **Section C – Taxi Operator of Other Vehicles for Hire**

Residential Background

Street Address: _____

City: _____ State: _____ Zip: _____

Occupancy dates at the above address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Occupancy dates at the above address: _____

*P.O. Box is not permissible

• **Section D – Patrolman:**

BMC 5.48 It shall be unlawful for any person to operate a patrol system or act as a patrolman, unless such person has first obtained a permit or is listed on a permit as patrolman, as herein provided, and such permit is in full force and effect.

Have you ever been convicted of any crime as a result of any arrest, citation of criminal complaint (Do not include traffic infractions?) Include any convictions expunged via 1203.4 PC Yes No

If yes, please explain in detail: _____

Additional requirements to be included with the application:

Fingerprints on a form provided by the Sheriff Department

• **Section E – All Applicants:**

Please include the following with the application:

Two (2) 1 x 1 photos of the applicant taken within the last sixty (60) days

The applicant above acknowledges that he/she has read the provisions of the Chapter of the Bellflower Municipal Code relating to the stated permit for which an application is being made and will observe, abide by and be bound by such provisions:

Applicant (Please Print) _____ Date _____

Applicant Signature _____

***Taxi Operator or Vehicles for Hire (Permit Fee \$30.00, If denied non-refundable)**
***Patrolman (Permit Fee \$10.00, If denied non-refundable)**
***Fingerprinting (Approximately \$60.00 per person and non-refundable)**

For Internal Use:

Date Received: _____ By: _____

Receipt #: _____ Amount: _____