

**APPLICATION FOR TOWING  
TOWNSHIP OF EWING  
2 JAKE GARZIO DRIVE  
EWING, NJ 08628  
609-538-7609  
FAX: 609-771-0480**

*Please be advised that Towing service is up for renewal in March. You will need to fill out the application and return it to the Clerk's Office along with proof of insurance. (Certification to accompany this application)*

1. *Garages keepers' policy not less than \$60,000.*
2. *Garages liability policy not less than \$500,000.*

\*\*\*\*\*

**Towing Fee \$415.00  
Licensing Period - March 1<sup>st</sup> – February 28<sup>th</sup>**

**Light Duty** \_\_\_\_\_

**Heavy Duty** \_\_\_\_\_

**Hourly availability of wrecker(s)** \_\_\_\_\_

**Year** \_\_\_\_\_ **Make** \_\_\_\_\_ **Model** \_\_\_\_\_

( Please Print)

**Owners Name** \_\_\_\_\_

**Business Address** \_\_\_\_\_

**Business Phone** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**New Business** \_\_\_\_\_ **or Renewal** \_\_\_\_\_

**All Drivers/Drivers Lic.#** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I CERTIFY THAT ALL INFORMATION THAT I HAVE PROVIDED IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE:**

\_\_\_\_\_  
**SIGNATURE OF APPLICANT** **DATE**

**POLICE DEPARTMENT**  
**APPROVED YES** \_\_\_\_\_ **NO** \_\_\_\_\_ **REMARKS** \_\_\_\_\_

**DATE** \_\_\_\_\_ \_\_\_\_\_  
**CHIEF OF POLICE**