

# Bridgeport Police Department

## Application for Inclusion on the Municipal Accident Towers List



To be filled out by the Bridgeport Police Department

State of Connecticut used or new car dealer license or State of Connecticut Motor Vehicle repairer's license pursuant to C.G.S. Section 14-66.

Principles of the towing operation have been identified and set forth in writing.

Towers shall have a minimum of two suitable radio-equipped tow trucks on duty.

Tower shall have the minimum of one flatbed truck or other vehicle capable of towing vehicles stripped of wheels.

Tow trucks are lettered on both sides of the vehicles depicting the name of the tower and its telephone number. Lettering will be a minimum of three inches high and will be maintained in a clean legible condition.

Tow trucks are maintained in good condition.

The tower has suitable on-site secure outdoor storage space (20) sufficient to accommodate all vehicles towed by the towing service, completely enclosed by metal fencing at least eight feet high and with suitable lighting.

The tower has additional indoor secure storage(10) sufficient to accommodate those vehicles requiring indoor storage as evidenced by the condition of the vehicle and/or specifically requested by the Bridgeport Police Department.

The tower has provided proof of the procurement of the necessary insurance coverage with insurers licensed or approved to conduct business in the State of Connecticut and holding a current financial rating in A.M. Best & Company satisfactory to the City. (Certificate of Insurance). For the specific and necessary insurance coverage, refer to City Ordinance 10.20.110 & 5.76

Fees for the towing and storage of any vehicle pursuant to these regulations shall be posted in accordance with the regulations of the Department of Motor Vehicles.

Endorsement from the Bridgeport Tax Collector certifying that all applicable taxes owed to the City of Bridgeport are up to date.

Certificate of Compliance or letter from Bridgeport Zoning Department stating the applicant and business address meet all zoning requirements.

Certificate of Workers Compensation insurance

Accident Application Fee: \$450.00 Application: Approved:  Denied:  Revoked:

Signature of Approving Authority: \_\_\_\_\_ Date: \_\_\_\_\_