



INCORPORATED VILLAGE OF  
**Roslyn Harbor**

**500 Motts Cove Road South**  
**Roslyn Harbor, NY 11576**  
 PH (516) 621-0368  
 FAX (516) 621-1803

APPLICATION FOR LICENSE AS  
**TOW CAR OWNER**

INCLUDING APPLICATION FOR VEHICLES TO BE LICENSED AS TOW CARS

CHECK TO INDICATE TYPE OF OWNERSHIP <input type="checkbox"/> INDIVIDUAL OWNER <input type="checkbox"/> CO-PARTNERSHIP <input type="checkbox"/> CORPORATION						
NAME OF APPLICANT					TELEPHONE NUMBER	
ADDRESS						
EXACT LOCATION OF GARAGES OR DISPATCHING OFFICE:						
<b>CORPORATION, CO-PARTNERSHIP OR INDIVIDUAL USING A TRADE NAME</b> IF CORPORATION, CO-PARTNERSHIP OR INDIVIDUAL USING A TRADE NAME, FILL IN BLANK SPACES BELOW						
CORPORATION OR TRADE NAME:					TELEPHONE NUMBER:	
MAIN OFFICE ADDRESS:						
YEAR INCORPORATED:				STATE INCORPORATED:		
PARTNER OR PRESIDENT	NAME:		ADDRESS:			
PARTNER OR VICE PRESIDENT						
PARTNER OR SECRETARY						
PARTNER OR TREASURER						
WHAT CONNECTION HAS ABOVE NAMED CORPORATION, CO-PARTNERSHIP OR INDIVIDUAL WITH OWNERSHIP OR OPERATION OF VEHICLES? <input type="checkbox"/> OWNER <input type="checkbox"/> HOLDING COMPANY <input type="checkbox"/> LESSEE <input type="checkbox"/> OPERATING COMPANY						
<b>CITIZENSHIP</b> TO BE FILLED OUT IN RELATION TO EACH INDIVIDUAL OR PARTNER AND EACH OFFICER OF THE CORPORATION MAKING THIS APPLICATION						
FULL NAME	BIRTHPLACE	AGE	NATURALIZED (YES OR NO)	DECLARED INTENTIONS (YES OR NO)	DATE	COURT

PUBLIC LIABILITY INSURANCE			PROPERTY DAMAGE INSURANCE		
AMOUNT	POLICY NO.	COMPANY	AMOUNT	POLICY NO.	COMPANY
WERE YOU, OR ANY OTHER MEMBER OF FIRM OR CORPORATION, EVER CONVICTED OF ANY CRIME OR OFFENSE OTHER THAN TRAFFIC INFRACTIONS?					
WHO (NAME)	WHAT CRIME OR OFFENSE?	WHEN?	WHERE?	PENALTY IMPOSED	

DESCRIBE BELOW EACH VEHICLE FOR WHICH APPLICATION IS MADE FOR A TOW CAR LICENSE					
YEAR	MAKE	MODEL	DATE LAST INSPECTED	NYS REGISTRATION NO.	TOW CAR LICENSE NO.

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF A COPY OF THE "TOW CAR ORDINANCE" OF THE INCORPORATED VILLAGE OF ROSLYN HARBOR AND HEREBY CERTIFIES THAT HE HAS COMPLETELY READ AND UNDERSTOOD THE ORDINANCE, AND AGREES TO COMPLY WITH ALL PROVISIONS CONTAINED THEREIN.

THE FOLLOWING **MUST BE** COMPLETED BEFORE ANY TOW CAR LICENSES WILL BE ISSUED:

COMPLETE NAME, ADDRESS AND TELEPHONE NUMBER OF OFFICER OF COMPANY THAT WILL ACCEPT SERVICE OF ANY INFORMATION OR SUMMONS FROM THE VILLALGE.

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I SOLEMNLY SWEAR TO THE TRUTH OF THE ABOVE STATEMENTS:

\_\_\_\_\_ PRINT NAME                      \_\_\_\_\_ SIGNATURE                      \_\_\_\_\_ PRINT TITLE                      \_\_\_\_\_ DATE

**OFFICIAL USE ONLY**

**LICENSE NO:** \_\_\_\_\_ **ASSIGNED:** \_\_\_\_\_ **ISSUED:** \_\_\_\_\_ **FEE PAID:** \_\_\_\_\_



INCORPORATED VILLAGE OF

## Roslyn Harbor

### INDEMNIFICATION/HOLD HARMLESS AGREEMENT

The Vendor/Contractor shall indemnify and hold harmless the Inc. Village of Roslyn Harbor, its officers, employees, and/or agents from any and all liability, damage, loss, claims, demands and actions of any nature whatsoever, for any reason whatsoever, foreseeable or unforeseeable, which arises out of or is connected with, or is claimed to arise out of to be connected with, any undertaking, product, goods, merchandise, products, services sold and/or work supplied, furnished or performed by the Vendor/Contractor or its subcontractors, agents, servants, or employees, including without limiting the generality of the forgoing, all liability, damages, loss, claims, attorneys, court and adjusting fees, demands and actions on account of personal injury, death or property loss to the Inc. Village of Roslyn Harbor its officers, employees, agents or to any other persons, third parties, or property, but shall not include claims resulting from the gross negligence or willful misconduct of the Inc. Village of Roslyn Harbor. This indemnity and hold harmless is intended to be as broad as is permitted by law and to include claims of every kind and nature – for tort, under contract; for strict liability or other liability without fault; under statute, rule, regulation or order; and otherwise.

IN WITNESS WHEREOF, the undersigned has duly executed this Agreement the \_\_\_ day of \_\_\_\_\_, 202\_\_.

\_\_\_\_\_  
Name of Firm

\_\_\_\_\_  
Address

\_\_\_\_\_  
Contractor's Signature

\_\_\_\_\_  
(Please Print Name and Title)

Witness:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name