State of Illinois
Illinois Commerce Commission 527 E. Capitol Avenue, Springfield, IL 62701 217/782-4654 Fax 217/785-1448

Non-Relocation Towing License Standard Application

Completion of this form is necessary to accomplish the statutory purpose as outlined in the Illinois Commercial Transportation Law Sections 18c-5303, 18c-5304 and 18c-5305. Failure to complete this form may prevent your request for a license from being processed. This form has been approved by Forms Management Center.

Docket No. _____
(To be entered by Commission)

INFORMATION ABOUT APPLICANT

1. (a) Full legal name: _____

(b) If you will be using a trade name which is different from your full legal name, enter the trade name here:

_____

2. Mailing address: _____

Street and Number

_____ _____ _____ _____
City State Zip Code County

3. Phone Number: _____

4. Please choose the term that best describes your business:
○ (a) Individual proprietorship
○ (b) Partnership
○ (c) Corporation

(Indicate date _____ and State _____ of incorporation)

If you checked 4(b), you must attach a complete list of partners names and addresses. If you checked 5(c) and are incorporated in a state other than Illinois, you must attach a certificate of authority to do business in Illinois. This certificate can be obtained from the Illinois Secretary of State. Illinois Corporations must attach verification of registration with the Illinois Secretary of State.

5. Do you already hold a motor carrier license issued by the Commission? ☐ Yes ☐ No

If you answered "yes", enter your MC number here: _____

INFORMATION ABOUT LICENSE YOU ARE APPLYING FOR

6. The license you seek would authorize (choose one):

If you choose 6(b), your insurance costs may be higher, You should consult with your insurance agent before completing this question.

○ (a) Non-relocation towing of vehicles only
○ (b) Non-relocation towing generally

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7. What is the territorial extent of your proposed non-relocation towing operations? (Describe in terms of radius. Please read instructions before completing this question.)

_____

List the CENTER of your radius and the MILES the radius will extend: _____

City, Town, Village or point _____

Miles the radius will extend _____

8. If the City, Town, Village or point shown in answer 7 is over 15,000 in population, indicate the intersection of highways or roads visible on the official State Highway map from which the radius will begin: _____

ATTORNEY OR OTHER CONTACT

9. If you want the Commission to communicate with an attorney or other person representing you regarding this application, complete the fields provided below:

(a) Name: _____

(b) Address: _____

City	State	Zip Code

(c) Phone Number: _____

APPLICANT'S SIGNATURE

Your signature on this form constitutes your verification that the information contained herein is true and correct.

Applicant's Signature	Date	Position or Title

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APPLICANT'S FITNESS STATEMENT

1. My net worth was:_____ as of _____
2. A list of my drivers, and of persons who supervise or assist my drivers, is attached.
3. A list of equipment I will use under the license is attached.
4. Have you or any of the owners, officers or directors or partners of the applicant been convicted:
   (a) Within the 2 years immediately preceding the filing of this application of a felony involving theft of property, violence to persons, or criminal damage to property? ◯Yes ◯No
   (b) Within 1 year immediately preceding the filing of this application of safety violations on 3 or more occasions in which the applicant's vehicles were taken out of service, or which otherwise show the applicant to be unfit? ◯Yes ◯No
5. Does applicant employ or lease drivers, or persons who supervise or assist its drivers, who have been convicted of the foregoing violations within the applicable time frames? ◯Yes ◯No
6. Applicant agrees not to employ or lease drivers, or persons who supervise or assist its drivers, who have been convicted of the foregoing violations within the applicable time frames.
7. If you answered "yes" to either questions 4(a), 4(b) or 5, attach a sheet listing the crimes or safety violations by date, describe the nature of the crime or violation and court disposition.
8. By filing this application, applicant states that it is familiar with and will comply with the Illinois Commercial Transportation Law and Commission regulations adopted pursuant to the Law.

CHECKLIST

To make sure your application is complete, please review the following checklist before mailing or delivering your application:

- ☐ **1. Did you complete the entire application form?**
- ☐ **2. Did you attach a list of partners or Certificate of Authority to do Business in Illinois, if applicable?**
- ☐ **3. Did you complete the Applicant's Fitness Statement?**
- ☐ **4. Did you complete and attach the Driver List and Equipment List?**
- ☐ **5. Did you attach a list of criminal and safety violations, if applicable?**
- ☐ **6. Did you enclose a check or money order for the filing fee of $50.00, payable to the Illinois Commerce Commission, with the applicant form?**

If a license is granted to you, it cannot be issued until you have filed a tariff and your insurance company has filed proof of insurance. You cannot operate legally until the license has been issued to you and is in each of your vehicles.

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List of Drivers and Persons Who Supervise or Assist Drivers

Name	Address	Social Security Number

(Use Additional Sheets if Necessary)

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Equipment List

Make	Model	Year	TYPE

(Use Additional Sheets if Necessary)

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PLEASE READ CAREFULLY BEFORE FILLING OUT THE APPLICATION FORM!!

General Instructions

1. This application form must be used if:

   (a) you are a new towing company or

   (b) if you are an existing towing company seeking an extension of the authorities set out in your present Commission license (other than the "50 mile radius" license which an existing licensed towing company may request by filing the "Special Application") or

2. Once filed, your application will be reviewed for completeness. If complete, you will be directed to publish notice of the application in the official state newspaper, which will include a place and date for hearing assigned by the Commission.

* "Relocation towing" from private property applies only to the transportation of trespassing vehicles in Cook, DuPage, Kane, Will, Winnebago and DuPage Counties. Request for a Relocator's license must be made on the Commission's "Relocator's Application Form".

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Specific Instructions

(Please refer to line number on the application)

This standard Application must be used by new towing companies or those towing companies seeking an extension of their existing authorities granted by a Commission license or those not having an Illinois principal place of business. However, an existing licensed towing company seeking a "50 mile radius" license may use the "Special Application".

Line 1(a). Give full legal name of applicant under which the license will be issued, such as "John B. Smith Company."

Line 1(b). If you will be using a name different than that listed in line 2(a) in operating your business, check "yes" and supply the complete name. For example, "John B. Smith Company" for business purposes may be know as "Smittys" or "Johnnys."

Line 2. Supply the complete mailing address of your business.

Line 3. Supply the phone number, including area code, where you can be reached during normal business hours.

Line 4. Choose only one box. Also be sure to attch any necessary documents that may be required depending on the box chosen.

Line 5. If you have a Commission motor carrier license to operate, check the "yes" box and enter your MC number in the space provided.

Line 6. Choose only one box. By checking box 7(a) you will be able to transport all types of vehicles with any type of towing equipment. Box 7(b) would enable you to transport such things as mobile homes and construction equipment in addition to vehicles.

Line 7. You should describe the territorial extent of your proposed operations in terms of a radius. For example, "50 mile radius from Springfield, Illinois and from points within that radius to points in Illinois and vice versa." It is customary to use the City, Town or Village or points where you will operate your towing business at the center of the radius.

At the hearing to be held on your application you must provide evidence and testimony showing a public need for the service you are proposing. this can be accomplished through testimony of future users of the proposed service and/ or other evidence showing a public need for the proposed service.

Line 8. Answer this question ONLY if the center of the radius is a City, Town or Village or point over 15,000 in population. For example, you have your place of business at South Grand Avenue and Smith Street, which is the intersection of State Highway 30 and 40.

Line 9. Fill out this line ONLY if you want someone else to be contacted (attorney, for example) about your application.

Print Form