



# CITY OF PORTLAND

## 2018 APPLICATION TO PERFORM PRIVATE PROPERTY IMPOUNDS Portland City Code (PCC) 7.24



- Please allow 10 business days (from time all required documents are received) for permit processing.
- Permits will not be issued until:
  - Fully Completed application is received; and
  - Facility and equipment have passed inspection by complying with Portland City Code 7.24 and Administrative Rules(see LIC 9.01-13(4)); and
  - Certificate of Liability Insurance with equipment list and Additional Insured Endorsement (see PCC 7.24.040) ; and
  - List of Proscribed Properties (previously approved)
  - Applications for proscribed property (not previously approved); and
  - Sample of your patrol agreement
- Tower is not authorized to perform PPI tows in Portland until permit has been issued.
- Please type or print legibly. If necessary, you may attach additional pages
- Submit Application
  - Email to: [Patrick.Kramer@portlandoregon.gov](mailto:Patrick.Kramer@portlandoregon.gov)
  - Via US Mail to: 1120 SW 5<sup>th</sup> Ave, Suite 1410, Portland OR 97204; or
  - FAX to: (503)865-3022; or

1. Legal Name of Towing Business: \_\_\_\_\_

2. Additional dba's, if applicable: \_\_\_\_\_

3. Business Address: \_\_\_\_\_  
City, State, Zip

4. Mailing Address, if different: \_\_\_\_\_

5. Email address: \_\_\_\_\_

6. Is the applicant compliant with City of Portland Business Tax and Multnomah County Business Income Tax?(office use only) YES \_\_\_\_\_ NO \_\_\_\_\_

7. Primary storage facility address: \_\_\_\_\_

8. Secondary storage facility address, if any: \_\_\_\_\_

9. Owner's Name(s) [or Corporation]: \_\_\_\_\_  
\_\_\_\_\_

10. Office Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

11. Emergency Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

12. Night Dispatcher's Business Name and Address, if different from applicant: \_\_\_\_\_  
\_\_\_\_\_

Night Dispatcher's e-mail, if available: \_\_\_\_\_

13. Night Dispatcher's Telephone Number: \_\_\_\_\_ **FAX:** \_\_\_\_\_

14. List the full names, and titles, of all owners, part-owners, partners, principal parties, officers, directors, agents, investors, and any other persons having a financial interest in the business activities regulated by this permit:

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

15. Complaint Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

16. Insurance Information – **Note:** Copies showing insurance types and limits must be attached every year.  
(Permit not issued without current proof of insurance.)

Insurance Company Name: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_

Agent's Name and Telephone Number: \_\_\_\_\_

Insurance Policy Number: \_\_\_\_\_ Policy Expiration Date: \_\_\_\_\_

17. List all staff and drivers having contact with vehicles or vehicle owners:

<b>First, Middle and Last Name</b>	<b>Social Security Number (last 4 digits)</b>	<b>Date of Birth</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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18. List all tow trucks to be used for PPI tows: (Type = wheel lift, rollbed, etc.) (ID = truck number or City plate number, if registered for City Tow contract)

<u>License Plate</u>	<u>VIN</u>	<u>Type</u>	<u>ID</u>

19. List any towing companies you subcontract with for use of special tow equipment. If none, write "None" in the space below.

Subcontractor Company #1 Name

Subcontractor Company #2 Name

20. Does the applicant company have any "proscribed properties" as clients? YES \_\_\_\_\_ NO \_\_\_\_\_  
If "yes," please attach a completed "Registration of Proscribed Property" form for each property.

21. Does the applicant company provide patrol service? YES \_\_\_\_\_ NO \_\_\_\_\_  
Please attach a copy of your standard PPI Authorization Agreement.

**I have read and understand the provisions of Portland City Code Section 7.24, Towing of Vehicles from Private Property and Administrative Rules LIC-9.01-13 through LIC 9.05-13**

\_\_\_\_\_  
Signature- Authorized Representative of Company

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name-Authorized Representative of Company

\_\_\_\_\_  
Title