

# SAN DIEGO POLICE DEPARTMENT - PERMITS AND LICENSING



## **TOW DRIVER & IMPOUND PROVIDER INFORMATION SHEET**

The City of San Diego Police Department Licensed Tow and Impound Agreement(s) states you must have a valid City issued Police Authorized Towing & Impound Company identification card to perform towing services for the San Diego Police Department. You are responsible for being familiar, complying with, and adhering to all the rules, regulations, and specification related to the Licensed Tow and Impound Providers as outlined in the RFSQ, the San Diego Police Department Managed Towing Operations Manual; and any awarded Tow Agreement(s). Copies of the documents may be obtained from the City's Purchasing & Contracting Office Clerk's office located at 1200 Third Avenue, , Suite 200 San Diego, CA. 92101-4195, Telephone # (619) 236-6000, or via the City's website: http://www.sandiego.gov (Department, Purchasing, Bids-Contracts).

*Tow Driver/Provider* - means any person who is currently employed by a qualified Tow Provider selected by the City of San Diego Police Department to provide towing services under a Tow Agreement and who is tasked with carrying out the day-to-day operations, including, but not limited to driving and/or operating approved tow truck and equipment as specified by the San Diego Police Department Managed Towing Operation Manual, engaged in the management, ownership, partnership, or having lawful interest in a qualified Licensed Tow Provider (LTP).

*Impound Operator/Provider*- means any person who is currently employed by a qualified Tow provider selected by the City of San Diego Police Department to provide towing, impound, storage, release, and disposal services under a Tow and/or Impound Agreement and who is tasked with carrying out the day-to-day operations, including, but not limited to the management, ownership, partnership, or having lawful interest in a qualified Licensed Impound Provider (LIP).

ALL NEW APPLICATIONS MUST BE SUBMITTED IN PERSON TO THE OFFICE OF THE CITY TREASURER located at 1200 Third Avenue, Suite 100, San Diego, CA 92101. For questions, contact the Business Tax Program at: (619) 615-1500.

### YOU MUST PROVIDE THE FOLLOWING WHEN APPLYING FOR THE ABOVE MENTIONED POLICE ID CARD

### INCOMPLETE APPLICATION PACKETS WILL NOT BE ACCEPTED

- <u>POLICE TOW DRIVER/IMPOUND PROVIDER APPLICATION</u> Fill out the application completely. Be sure to specify which Permit Type you are applying for. A thirty (30) day investigation period begins at the time the application is submitted. A criminal records check will be made on each applicant.
- LIVE SCAN FINGERPRINTS Required for all new applicants. The San Diego Municipal Code states Fingerprints must be taken by a Governmental Agency. See attached list of authorized locations. Fill out the attached applicable (Tow Driver/Impound Provider) "Request for Live Scan Service" form and bring it with you to a Live Scan agency. Return your completed application to the Office of the City Treasurer so your application can be processed. The completed "Request for Live Scan Service" form is valid for only thirty (30) days from the date your fingerprints were taken. After thirty (30) days you will be required to re-do your Live Scan fingerprints. All applicable Live Scan Fees are paid by applicant.
- <u>IDENTIFICATION</u> A current U.S. government issued photo identification card (i.e. Military I.D., U.S. Passport) is required along with a valid California Driver's license listing all applicable vehicles and equipment endorsements.
- <u>FEES</u> Cash, checks, and credit cards are accepted. Please make checks, money orders, and cashier's checks payable to the **City Treasurer**.
- <u>PHOTOGRAPHS</u> Photo ID will be taken at the time of application at the Office of the City Treasurer. The \*\*Photo ID Fee (\$16.00) is non-refundable.

All City issued identification cards for authorized Tow Driver and Impound Providers expire one year after issuance. All expired identification cards must be returned the San Diego Police Department Tow Administration Unit without delay. Regulation and enforcement will continue to be performed by The San Diego Police Department.

POLICI	E PERMIT AI	PPLICATION - TO		MPOUND PROV	/IDER
SS STATE OF	1200	SUBMIT FORM IN OFFICE OF THE CIT THIRD AVE SUITE 100 (619) 615	TY TREASURER ), SAN DIEGO, CA	<b>A</b> 92101	
FINEST	PLEASE CO	OMPLETE ALL SE (TYPE OR PRIN		PPLICABLE	THER VICINA
PERMIT TYPE:		PERMIT NUM	BER (D/L):		
Applicant's Full Nat	me:				
	Last		First		Middle
Date of Birth:		_Driver's License #: _		State:	
Residence Address:			_ City, State, Zip	Code:	
Mailing Address:		City	, State, Zip Code	:	
Residence Phone #:			_ Cell Phone #: _		
Social Security #:			Email Address:		
Eyes:	Hair:	Height:	Weight:	Race:	_ Sex:
Tow Business When	re Applicant E.	xpects to be Employed	<u>d</u> :		
Business Name:					
Business Address: _		C	ity, State, Zip Co	ode:	
1. List <u>similar</u> pe	ermits or license	s issued by any agenc	y or board, or an	y city, county, state	e or federal

agency in the past five (5) years. IF NONE, INITIAL HERE:

TYPES OF	F LICENSE	LICENSE NUMBER	DATES	HELD	CITY AND STATE
1.			FROM	ТО	
2.			FROM	ТО	
3.			FROM	ТО	

FOR OFFICE USE ONLY					
Application Date:	Corresponding Permit #:	Received by:	Live Scan Rec:		
Approving Officer:		Date:			

2. Have you ever had any permit or license issued by any agency or board, or any city, county, state or federal agency suspended or revoked? *Yes No* 

## If yes, please complete below:

CITY/STATE	DATE OF SUSPENSION OR REVOCATION	REASON
1.		
2.		
3.		

3. List all criminal convictions, excluding infractions. Include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of *nolo contendere*. Expunged convictions must be listed per California Penal Code section 1203.4(a).

	CHARGE	DATE CONVICTED	LOCATION OF COURT
1			
2			
3			
4			
5			
6			

### IF NONE, INITIAL HERE: \_\_\_\_\_

\*For additional info in any section, please use separate sheet(s).

4. Have you been arrested in the last five years? \_\_\_\_\_

5. Has a notify warrant been issued against you in the last five years?

If you answered "YES" to questions #4-5, please provide details below:

I declare under penalty of perjury that the statements made herein are true and correct to the best of my knowledge and belief.

APPLICANT'S SIGNATURE

State of California			Department of Justice	
REQUEST FOR LIVE SCAN SE BCII 8016 (3/07)	RVICE			
Applicant Submission				
ORI: <u>CA0371100</u> Code assigned by DOJ	Type of Application:	Permits and Licensing		
Job Title or Type of License, Certificatio	on or Permit:			
Agency Address Set Contributing Agency:				
San Diego Police Departme	information	08228 Mail Code (five-digit code assigned by DOJ)		
P.O. BOX 121431 - MS 732 Street No. Street or PO Box		SDPD TOW ADMINISTRATION UNIT Contact Name (Mandatory for all school submissions		
	ornia 92112-1431	(858) 495-7830		
City State	Zip Code	Contact Telephone No.		
Name of Applicant: (Please print) Last		First	MI	
(Please print) Last Alias:		Driver's License No:	IVII	
Last	First			
Date of Birth: Sex	:: Male Female	Misc. No. BIL - <u>APPLIC</u>	ANT TO PAY ncy Billing Number	
Height: Weight: _		Misc. Number:		
		Home Address:		
Eye Color: Hair Color	:	Street No. St	reet or PO Box	
Place of Birth:		City, State and 2	Zin Codo	
Social Security Number:			zip Code	
Your Number: OCA No. (Agency	Identifying No.)	Level of Service: X DOJ	X FBI	
If resubmission, list Original ATI Number:				
Employer: (Additional response for agencies s	pecified by statute)			
Not Applicable Employer Name				
Street No. Street or PO Box	Ma	ail Code (five digit code assigned by DOJ)		
City State	( Zip Code Ag	) ency Telephone No. (optional)		
Live Scan Transaction Completed By:	Name o	f Operator	Date	
Transmitting Agency	ATI No.		Amount Collected/Billed	

ORIGINAL - Live Scan Operator; SECOND COPY - Applicant; THIRD COPY (if needed) - Requesting Agency

State of California			Department of Justice	
REQUEST FOR LIVE SCAN SE BCII 8016 (3/07)	RVICE			
Applicant Submission				
ORI: <u>CA0371100</u> Code assigned by DOJ	Type of Application:	Permits and Licensing		
Job Title or Type of License, Certificatio	on or Permit:			
Agency Address Set Contributing Agency:				
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City State	Zip Code	Contact Telephone No.		
Name of Applicant: (Please print) Last		First	MI	
(Please print) Last Alias:		Driver's License No:	IVII	
Last	First			
Date of Birth: Sex	:: Male Female	Misc. No. BIL - <u>APPLIC</u>	ANT TO PAY ncy Billing Number	
Height: Weight: _		Misc. Number:		
		Home Address:		
Eye Color: Hair Color	:	Street No. St	reet or PO Box	
Place of Birth:		City, State and 2	Zin Codo	
Social Security Number:			zip Code	
Your Number: OCA No. (Agency	Identifying No.)	Level of Service: X DOJ	X FBI	
If resubmission, list Original ATI Number:				
Employer: (Additional response for agencies s	pecified by statute)			
Not Applicable Employer Name				
Street No. Street or PO Box	Ma	ail Code (five digit code assigned by DOJ)		
City State	( Zip Code Ag	) ency Telephone No. (optional)		
Live Scan Transaction Completed By:	Name o	f Operator	Date	
Transmitting Agency	ATI No.		Amount Collected/Billed	

ORIGINAL - Live Scan Operator; SECOND COPY - Applicant; THIRD COPY (if needed) - Requesting Agency

# **Live Scan Fingerprint Information**

### Municipal Code §33.0304 - Applicant and Employees to Furnish Fingerprints and Photographs

For the purpose of investigation and for regulation of the occupation or business during the time it is licensed, applicants, *responsible persons*, managers, or *employees* may be required to furnish their fingerprints and photographs. *Fingerprints must be taken by a governmental agency.* The *Chief of Police* shall forward the fingerprints to the Identification Division of the State of California, Department of Justice, or the Federal Bureau of Investigation, for identity confirmation and criminal histories.

### The following are acceptable US Governmental Agencies located in San Diego County:

#### CHULA VISTA

Chula Vista Police Department 315 Fourth Avenue Chula Vista, CA 91911 Contact: (619) 409-5954 M - F, 8am-12pm, **Appointments Only** M - F, 1pm-4pm, **Appointments Only** www.chulavistapd.org

### LA MESA

La Mesa Police Department 8085 University Avenue La Mesa, CA 91942 Contact: (619) 667-7592 M - F, 9am - 430pm **Appointments/Walk-In \*Hours may vary. Call to confirm.** 

SAN DIEGO – LSID X54/ML1 San Diego Community College Police 1536 Frazee Road, 1<sup>st</sup> Floor San Diego, CA 92108 Contact: (619) 388-6416 M - F, 8am-4pm, Appointments Only