



# TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

## TOWING OPERATOR AND VEHICLE STORAGE FACILITY EMPLOYEE LICENSE APPLICATION INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper.

**DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.**

1. CHOOSE A LICENSE TYPE - Place a check in the box for the license you are applying.
2. NAME – Provide your legal name as it will appear on your license. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
3. DATE OF BIRTH – Provide your birth date.
4. GENDER – Select whether you are male or female.
5. SOCIAL SECURITY NUMBER – Social Security number disclosure is required by Section 231.302(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the [Texas Attorney General](#) or call (512) 460-6000 or (800) 252-8014.
6. MAILING ADDRESS – Provide your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
7. PHYSICAL LOCATION - Provide the physical location of your residence. Do not use a post office box.
8. BUSINESS PHONE NUMBER - Provide a telephone number, including the area code, where we can reach you during the day or where we can leave you a message.
9. FAX NUMBER - Provide a fax number, including the area code, where you can receive faxes.
10. EMAIL ADDRESS – Provide your email address. By providing my email address I authorize TDLR to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
11. DRIVER'S LICENSE - Provide your driver license number in the space provided. Your driver license must be valid and issued by a state in the United States.
12. CRIMINAL HISTORY – Indicate if you have ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation. If YES, complete and attach a [Criminal History Questionnaire](#) form for each offense.  
  
If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal evaluation, submit a [Criminal History Evaluation Letter](#), a completed Criminal History Questionnaire form for each crime you were convicted of, or placed on deferred adjudication for, and a \$10 fee.
13. DISCIPLINARY ACTION HISTORY – Indicate if you have ever had an occupational license, certification, or registration suspended, revoked, or denied in any state. If you have, complete and attach a [Disciplinary Action Questionnaire](#) for each disciplinary action.
14. IF YOU ARE APPLYING FOR A TOWING OPERATOR LICENSE, YOU MUST CHOOSE ONE OF THE TYPES LISTED BELOW  
Check the box that indicates the type of towing operator license you are applying for.
15. SIGNATURE AND DATE - Carefully read the statement of applicant before signing and dating the application.

**APPLICATION INFORMATION FOR MILITARY SERVICE MEMBERS, MILITARY VETERANS AND MILITARY SPOUSES**

The Texas Department of Licensing and Regulation recognizes the contributions of our active duty military service members, their spouses, and veterans. If you want to use one of the licensing options available to military service members, military veterans and military spouses, please complete the [Military Service Member, Military Veteran or Military Spouse Supplemental Application \(PDF\)](#) and attach it with your license application.

If you have additional questions about qualifications, training or experience requirements relating to occupation licensing for military service members, military veterans or military spouses please go to the [TDLR Military Information web](#).

**SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:**

Texas Department of Licensing and Regulation  
P.O. Box 12157  
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and you check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#) or reach Customer Service via [webform](#). The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202 [in state only], (512)463-6599, Relay Texas-TDD: (800) 735-2989.



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## TOWING OPERATOR AND VEHICLE STORAGE FACILITY EMPLOYEE LICENSE APPLICATION

**DO NOT WRITE ABOVE THIS LINE**

YOU MUST MEET ALL REQUIREMENTS WITHIN 12 MONTHS OF THE FILING DATE, OR THE APPLICATION WILL BE TERMINATED.

**TOW TRUCK OPERATOR APPLICATION FEE: \$100**  
**VEHICLE STORAGE EMPLOYEE APPLICATION FEE: \$75**  
**(FEE IS NON-REFUNDABLE)**

### 1. Choose a License Type:

- TOW OPERATOR** (a separate license is not required to work as a VSF employee)
- Vehicle Storage Facility Employee Only**

### 2. Name:

\_\_\_\_\_

Last

First

Middle Name

Suffix (JR, SR, III)

### 3. Date of Birth:

\_\_\_\_\_

MM/DD/YYYY

### 4. Gender:

- Male**     **Female**

### 5. Social Security Number:

\_\_\_\_\_

(See instruction sheet for disclosure information)

### 6. Mailing Address: (USED TO RECEIVE MAIL FROM TDLR) (A PO box is allowed for this address)

Number, Street Name, Suite Number/Apartment Number

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### 7. Physical Location: (A PO box is not allowed for this address)

Number, Street Name, Suite Number/Apartment Number

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### 8. Phone Number:

\_\_\_\_\_

Phone Number

### 9. FAX Number:

\_\_\_\_\_

Phone Number

### 10. Email Address:

\_\_\_\_\_

(Ex: johndoe@aol.com) See instruction sheet for disclosure information

### 11. Driver License:

\_\_\_\_\_ / \_\_\_\_\_

(Must be a valid driver's license issued by a state in the United States.) (STATE)

**12. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation?** If YES, complete and attach a Criminal History Questionnaire for each offense.  **Yes**  **No**

**See instruction sheet for more information**

**13. Have you ever had an occupational license, certification or registration suspended, revoked, or denied in any state?** If YES, attach a Disciplinary Action Questionnaire to this application for each action. (This does not include your driver license.)  **Yes**  **No**

**14. If you are applying for a towing operator license you must choose one of the types listed below.**

- An Incident Management (IM) Towing Operator may perform incident management tows, private property tows, and consent tows.
- A Private Property (PP) Towing Operator may perform private property and consent tows.
- A Consent Towing (CT) Operator may only perform consent tows.
- Note that IM and PP Towing Operators are required to be certified by the National Drivers Certification Program of the Towing and Recovery Association of America or another certification program approved by the Department. To view a list of approved certification programs, go to [www.tdlr.texas.gov/towing/towing.htm#certification](http://www.tdlr.texas.gov/towing/towing.htm#certification)

CHECK ONLY ONE: (If no type is checked, this application will be entered as an incident management towing operator application.)

Incident Management Towing Operator     Private Property Towing Operator     Consent Towing Operator

**15. STATEMENT OF APPLICANT**

By signing and submitting this application, I certify that information submitted on this and any attached forms is true and correct. I further certify that I will comply with all applicable provisions of the Texas Towing Act; Texas Occupations Code, Chapter 2303 and Chapter 2308; Texas Administrative Code, Chapter 60; the Towing Administrative Rules, Texas Administrative Code, Chapter 86; and the Vehicle Storage Administrative Rules, Texas Administrative Code, Chapter 85. I understand that providing false information on this application may result in revocation and/or denial of the license I am requesting and the imposition of administrative penalties and sanctions.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed