

42 Broadway New York, NY 10004

TowCompliance@dcwp.nyc.gov

Print Title/Position (if any)

**Dial 311** (212-NEW-YORK)

nyc.gov/dcwp

## **TOW TRUCK COMPANY ELECTRONIC RECORDKEEPING COMPLIANCE AFFIRMATION**

Т	ow Truck Company Name:	
	ow Truck Company OCWP License Number: if applicable)	
В	Business Address:	
l aff	firm the following:	
1.	I am authorized to complete and submit this affirmation on behalf of the Tow Truck Company named above (Applicant).	
2.	The Applicant understands that the following types of tows are subject to electronic recordkeeping requirements under Section 2-378 of Title 6 of the Rules of the City of New York:	
	<ul> <li>Directed Accident Resp</li> <li>Rotation Tow Program (</li> <li>Arterial Towing Program</li> <li>Removing vehicles impired</li> </ul>	(ROTOW)
3.	To the extent the Applicant performs any of the types of tows listed above, the business will maintain electronic records in compliance with Section 2-378 of Title 6 of the Rules of the City of New York.	
4.	I understand that falsification of any statement made herein is an offense punishable by a fine or imprisonment or both.	
Signature		Print Name

Date