|  |  |
| --- | --- |
| Company: |  |
| Contact: |  |
| Address: |  |
| Telephone: |  |

I acknowledge and understand the requirements and regulations as set forth in the Highway Patrol’s “Rotation Wrecker Service Regulations” pursuant to Chapter 14B of the North Carolina Administrative Code (NCAC) 07A.0116

I certify that I am now in full compliance with these regulations and agree to comply with these regulations at all times while my wrecker is on the Highway Patrol’s Wrecker Rotation List. I understand that my failure to comply with these regulations will result in removal of my wrecker from the list as specified.

I have a relative employed by the Highway Patrol in the county where I have applied to be on the Patrol’s Rotation Wrecker System. **Yes** **No** If yes, explain:

|  |  |
| --- | --- |
| **Printed Name AND Signature \*(*Required)*** | **Date** |
|  |  |

|  |  |
| --- | --- |
| **Printed Name AND Witness Signature \*(*Required*)** | **Date** |
|  |  |

The following portion of the form shall be completed by the appropriate District First Sergeant or designee after the documents are submitted to the District First Sergeant or designee by the wrecker service and **prior** to the inspection by the CVSA Certified Inspecting Member.

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Criminal record check of all drivers and owner |  |  |
| Copy of current “Certificate of Liability Insurance” with the NC Highway Patrol District First Sergeant and appropriate District office address listed as “Certificate Holder” |  |  |
| Copy of vehicle registrations for all wreckers / rollbacks on rotation |  |  |
| Price List for year of periodic inspection (submitted on HP-304C for small wreckers / rollbacks only) |  |  |
| Certified Driver’s License Record Checks for all Wrecker Drivers |  |  |
| Photo copy of Driver’s License for all wrecker drivers (black and white copies only) |  |  |
| Photo copy of a valid work VISA, or other appropriate INS documentation for all wrecker drivers and owner(s) (if applicable) |  |  |

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| --- |
| **Comments** |
|  |

|  |  |  |
| --- | --- | --- |
| **Inspected By** | **Date** | **Approved** |
|  |  | Yes  No |