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City of Moline

APPLICATION FOR RELOCATOR/ TOWING LICENSE

Annual Fee \$ 100.00

Name of Business: _____

Business Address: _____

Business Phone: _____

Business Owner: _____

Owner's Address: _____

Owner's Phone: _____

Please attach copy of your rate schedule. If at any time rates change, I agree to provide to the City of Moline - Finance Office a revised list of rates and post a new list of rates at my place of business.

I also agree to post any written contracts with property owners, lessors, or persons in control of property that authorizes my business to remove vehicles as provided by City Ordinance.

Signature: _____

Date: _____

Remittance: Make checks payable and remit to:

**City of Moline
Finance Dept
1616 6th Avenue
Moline, IL 61265**