

## **CITY OF CHICO**

## POLICE DEPARTMENT ROTATION TOW LIST



## OWNER/OPERATOR AND DRIVER INFORMATION

(To be updated annually.)

The Owner/Operator and Driver are advised that giving false information to a peace officer, either orally or in writing, is a misdemeanor pursuant to Vehicle Code Sections 20 and 31. By signing this form you certify that the information you have provided is true and correct and that no omissions have been made.

## TYPE OR PRINT CLEARLY

BUSINESS INFORMATION					
BUSINESS NAME			BUSINESS PHONE NUMBER		DATE
OWNER/OPERATOR INFORMATION					
1. OWNER/OPERATOR FULL NAME (FIRST, MIDDLE, LAST)				DOB	
DRIVERS LICENSE NUMBER	STATE	OWNER/OPERATOR SIGNATURE			
2. OWNER/OPERATOR FULL NAME (FIRST, MIDDLE, LAST)				DOB	
DRIVERS LICENSE NUMBER	STATE	OWNER/OPERATOR SIGNA	ATURE		
DRIVER INFORMATION					
1. DRIVER FULL NAME (FIRST, MIDDLE, LAST)			DOB		
DRIVERS LICENSE NUMBER	STATE	DRIVER SIGNATURE			
2. DRIVER FULL NAME (FIRST, MIDDLE, LAST)				DOB	
DRIVERS LICENSE NUMBER	STATE	DRIVER SIGNATURE			
3. DRIVER FULL NAME (FIRST, MIDDLE, LAST)			DOB		
DRIVERS LICENSE NUMBER	STATE	DRIVER SIGNATURE			
4. DRIVER FULL NAME (FIRST, MIDDLE, LAST)				DOB	
DRIVERS LICENSE NUMBER	STATE	DRIVER SIGNATURE			
5. DRIVER FULL NAME (FIRST, MIDDLE, LAST)				DOB	
DRIVERS LICENSE NUMBER	STATE	DRIVER SIGNATURE		'	