



# California Tow Truck Association

## Membership Application

Membership in the California Tow Truck Association (CTTA) is open to all towing companies who engage in the business of towing, transporting and recovering of motor vehicles within the State of California. To apply, **please complete this application and return it, along with payment & a copy of your Current Motor Carrier Permit** to the address, fax or email listed at the end of the page. *Membership is annual; tiers and payment information are available on page 2 of the application.*

### Company Contact Information

Company Name \_\_\_\_\_

Legal Business Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical Address (if different) \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

Business Website \_\_\_\_\_ Primary Contact Name \_\_\_\_\_

Primary Contact Phone \_\_\_\_\_ Primary Contact Email \_\_\_\_\_

### Company Detail Information

<p><b>Fleet Information</b></p> <p>Number of Service Trucks _____</p> <p>Number of Light Duty Trucks _____</p> <p>Number of Med. Duty Trucks _____</p> <p>Number of Heavy Duty Trucks _____</p> <p><b>Total Number in Fleet</b> _____</p>	<p><b>Additional Vehicles</b> (Mark All That Apply)</p> <p><input type="checkbox"/> Forklift</p> <p><input type="checkbox"/> Rotator</p> <p><input type="checkbox"/> Transport</p>	<p><b>Motor Carrier Permit</b></p> <p>CA/MCP # _____</p> <p>USDOT # _____</p> <p><b>Please provide a copy with your application</b></p>
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<p><b>Types of Services</b> (Mark All That Apply)</p> <p><input type="checkbox"/> California Highway Patrol</p> <p><input type="checkbox"/> Local Law Enforcement</p> <p><input type="checkbox"/> Freeway Service Patrol</p> <p><input type="checkbox"/> Official Police Garage</p> <p><input type="checkbox"/> AAA</p> <p><input type="checkbox"/> Other Motor Club</p> <p><input type="checkbox"/> Private Property</p> <p><input type="checkbox"/> Auto Return</p>	<p><b>Business Legal Entity</b> (Mark One)</p> <p>_____ Corporation</p> <p>_____ Partnership</p> <p>_____ Sole Proprietorship</p> <p>_____ LLC</p> <p>_____ LLP</p>
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## Membership Dues

- 1-3 Trucks ~~\$510~~ **\$310** per year
- 4-15 Trucks ~~\$600~~ **\$500** per year
- 16+ Trucks ~~\$690~~ **\$590** per year

Please mark the voting district (if known) where your tow company is located:

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Capitol          | <input type="checkbox"/> Inland Empire | <input type="checkbox"/> Palomar      |
| <input type="checkbox"/> Central Valley   | <input type="checkbox"/> Los Angeles   | <input type="checkbox"/> Redwood      |
| <input type="checkbox"/> Desert           | <input type="checkbox"/> Monterey      | <input type="checkbox"/> San Diego    |
| <input type="checkbox"/> Golden Empire    | <input type="checkbox"/> North State   | <input type="checkbox"/> San Joaquin  |
| <input type="checkbox"/> Greater Bay Area | <input type="checkbox"/> Orange County | <input type="checkbox"/> Tri Counties |

Please mark each voting district if your company has multiple locations.

Please fill out the payment information completely.

### Credit Card Information

Type of card:  Visa  Master Card  AMEX

Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_ Amount to be charged \$ \_\_\_\_\_

Signature \_\_\_\_\_

If paying by credit card, please e-mail [ctta@ctta.com](mailto:ctta@ctta.com) or fax completed membership application to (916) 414 - 3708

### Check Information

Check Number \_\_\_\_\_ Check Amount \$ \_\_\_\_\_

Please make check payable to **California Tow Truck Association**. Please mail payment with completed membership application to the address below:

**California Tow Truck Association**  
643 West Stadium Lane  
Sacramento, CA 95834

Membership applications cannot be processed until payment is received in full.

Please read the following pertinent information:

### Becoming a Member

By becoming a member, you agree to abide by the **Bylaws & Code of Ethics** of the California Tow Truck Association. Membership is annual, effective on the date your application and payment are received, renewals are billed on your anniversary date. Contributions or dues paid to the California Tow Truck Association are **NOT TAX DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS**. However, you may deduct the expenses as ordinary and necessary business expenses. Please consult a tax professional for further information.

### Your Contact Information

Please let us know how you would and would not like to be contacted. Unless otherwise noted on this application form, your contact information is shared with other CTTA members through our electronic directory. Contact the CTTA office at (916) 617-2882 or [ctta@ctta.com](mailto:ctta@ctta.com) if there is any information you do not wish to share.

By joining the California Tow Truck Association you automatically "opt-in" to our electronic communications such as the e-Newsletter, Training Updates, News Bulletins, and various other notifications. At any time you may opt-out through the "unsubscribe" link at the bottom of these e-mails.

### Communications & Third Party Links

At our discretion, we may occasionally include or offer third party products or services on our website and in our communications. These third party sites have separate and independent privacy policies. Therefore, we have no responsibility or liability for the content and activities of these linked sites. Nonetheless, we seek to protect the integrity of our site and welcome any feedback about these sites.

**By signing below, you acknowledge that you have read and understand the above policies & information, and, furthermore, that you agree to abide by the Bylaws and the Code of Ethics set forth by the California Tow Truck Association.**

Signature \_\_\_\_\_ Date \_\_\_\_\_