

# MONTANA HIGHWAY PATROL TOW TRUCK BUSINESS INSPECTION REPORT

BUSINESS NAME: \_\_\_\_\_ DBA: \_\_\_\_\_  
OWNER OF THE BUSINESS: \_\_\_\_\_ CEO: \_\_\_\_\_  
PHYSICAL ADDRESS (DO NOT USE P.O. BOX NUMBER): \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ COUNTY: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_  
BUSINESS TELEPHONE NUMBER: \_\_\_\_\_ AFTER HOURS NUMBER: \_\_\_\_\_

## COMMERCIAL TOWER REQUIREMENTS:

1. HQ MV-5 ON MHP LIST: YES  NO  (IF NO, DO NOT CONDUCT INSPECTION) (MCA 61-8-906)
  
2. TYPE OF BUSINESS ENTITY: CORPORATION  PARTNERSHIP  LIMITED LIABILITY COMPANY   
LIMITED PARTNERSHIP  SOLE PROPRIETORSHIP  (DBA) FOLDER IDENTIFICATION NUMBER: \_\_\_\_\_  
SECRETARY OF STATE BUSINESS ENTITY NUMBER: \_\_\_\_\_
  
3. BUSINESS IS OPERATED INDEPENDENTLY FROM ANY OTHER BUSINESS OPERATION: YES  NO
  
4. THE TOW TRUCK EQUIPMENT OF A COMMERCIAL TOW TRUCK OPERATOR MUST HAVE AN ANNUAL SAFETY INSPECTION:  
HIGHWAY PATROL INSPECTED: YES  (DATE: \_\_\_\_\_) NO   
DEPARTMENT OF TRANSPORTATION (MCS) INSPECTED: YES  (DATE: \_\_\_\_\_) NO
  
5. THE NAME OR TRADE NAME AND CITY AND STATE OF THE PERSON OR CORPORATION UNDER WHOSE JURISDICTION THE MOTOR VEHICLE IS BEING OPERATED MUST BE PERMANENTLY DISPLAYED ON EACH SIDE OF THE TOW TRUCK; THE DISPLAY OF NAME MUST BE IN LETTERS IN SHARP CONTRAST TO THE BACKGROUND AND IN SIZE, SHAPE, AND COLOR READILY LEGIBLE IN DAYLIGHT FROM A DISTANCE OF 50 FEET WHEN THE MOTOR VEHICLE IS NOT IN MOTION:  
YES  NO  (THE CFR CODE IS 390.21)
  
6. UPON SATISFACTORY COMPLETION OF THE BUSINESS INSPECTION AND VERIFICATION OF THE INSURANCE REQUIREMENTS FILED WITH MHP, A DECAL SHOWING THE INSPECTION DATE MUST BE AFFIXED IN A PROMINENT PLACE ON THE TOW TRUCK'S LOWER RIGHT WINDOW CORNER: YES  NO
  
7. DETERMINE CLASSIFICATION OF TOW TRUCK(S): RECORD NUMBER OF VEHICLES INSPECTED FOR EACH CLASSIFICATION:  
CLASS A \_\_\_\_\_ (MIN. 10,000 GVWR) CLASS B \_\_\_\_\_ (MIN. 18,000 GVWR)  
CLASS C \_\_\_\_\_ (MIN. 32,000 GVWR) CLASS D \_\_\_\_\_ (MIN. 10,000 GVWR) (MCA 61-8-905)

## ADDITIONAL ROTATION TOWER REQUIREMENTS:

8. IF THE OPERATOR OWNS MORE THAN ONE TOWING BUSINESS, EACH BUSINESS MUST HAVE A DIFFERENT IDENTIFIABLE NAME, ADDRESS, AND TELEPHONE NUMBER THAT IS ANSWERED AT THE BUSINESS LOCATION DURING NORMAL BUSINESS HOURS.  
YES  NO
  
9. MUST HAVE A LOCAL TELEPHONE NUMBER LOCATED AT THE BUSINESS OFFICE LOCATION: YES  NO
  
10. THE OPERATOR SHALL PROVIDE ADEQUATE STAFFING FOR EACH BUSINESS WITH PERSONNEL WHO ARE PRESENT AT THE BUSINESS LOCATION TO ANSWER ALL INCOMING CALLS AND WHO ARE ABLE TO RELEASE IMPOUNDED VEHICLES FROM 8 A.M. TO 5 P.M., MONDAY THROUGH FRIDAY, EXCEPT FOR STATE-RECOGNIZED HOLIDAYS. IN ADDITION, EACH BUSINESS LOCATION MUST BE STAFFED BY A SUFFICIENT NUMBER OF DRIVERS FOR A 24-HOUR A DAY OPERATION.  
YES  NO

11. THE OPERATOR MUST HAVE A BUSINESS LOCATION WITH ITS OWN OUTSIDE ENTRANCE, OR IF A BUILDING HAS ONE MAIN ENTRANCE, THE LOCATION MUST HAVE DOORS CLEARLY MARKING AND SEPARATING EACH BUSINESS WITH A SIGN AT THE FRONT DOOR AND A SIGN PLAINLY VISIBLE FROM THE STREET INDICATING THE COMPANY'S NAME, TELEPHONE NUMBER, AND OFFICE HOURS. SEPARATE BUSINESSES IN THE SAME ROTATION AREA MAY BE HOUSED IN ONE BUILDING, BUT THERE MUST BE A SOLID WALL FROM THE FLOOR TO CEILING TO SEPARATE EACH BUSINESS.  
 YES  NO
12. EACH COMPANY SHALL MAINTAIN ITS OWN SET OF REQUIRED RECORDS AND BOOKS, INCLUDING, BUT NOT LIMITED TO, A VEHICLE TRANSACTION FILE AND BILLING INVOICES AT ITS BUSINESS LOCATION. IF THERE IS A CORPORATE ACCOUNTANT OR BOOKKEEPER FOR MORE THAN ONE COMPANY, ALL RECORDS AND FILES FOR EACH COMPANY THAT ARE REQUIRED TO BE MAINTAINED AT THE BUSINESS LOCATION MUST BE MAINTAINED SEPARATELY.  
 YES  NO
13. A QUALIFIED TOW TRUCK OPERATOR ON ROTATION SHALL HAVE AN INDEPENDENT SECURE STORAGE FACILITY.  
*IF REQUESTING TO BE ON ROTATION MUST HAVE EITHER:*  
 6 FT. HIGH CHAIN LINK FENCED LOT: YES  NO  IF NOT CHAIN LINK FENCE MATERIAL: \_\_\_\_\_  
 OR BUILDING WITH INSIDE STORAGE: YES  NO
14. STORAGE YARD ADDRESS SAME AS BUSINESS OFFICE ADDRESS: YES  NO   
 IF STORAGE YARD ADDRESS IS NOT THE SAME LIST THE PHYSICAL LOCATION: \_\_\_\_\_  
 LOCATED IN A PLACE THAT IS REASONABLY CONVENIENT FOR PUBLIC ACCESS: YES  NO   
 ROTATION ONLY: IS THE STORAGE YARD ADEQUATE TO STORE ALL VEHICLES TOWED ON ROTATION FOR THE SPECIFIC CLASSIFICATION: YES  NO   
 SIZE OF STORAGE YARD: \_\_\_\_\_
15. EACH QUALIFIED TOW TRUCK OPERATOR PARTICIPATING IN THE ROTATION SYSTEM SHALL HAVE AVAILABLE AND SHOW UPON THE REQUEST OF A LAW ENFORCEMENT OFFICER:  
 (A) DEPARTMENT OF TRANSPORTATION (DOT) NUMBER: YES  NO  (IF OVER 26,000 LBS OR INTERSTATE)  
 (B) OPERATOR'S FEDERAL TAX IDENTIFICATION NUMBER: YES  NO   
 (C) THE OPERATOR'S COMPANY HAS A REQUIRED OUTSIDE BUSINESS SIGN (PLAINLY VISIBLE), PHONE NUMBER AND STREET ADDRESS: YES  NO
16. IF THE OPERATOR IS A FIRM OR OTHER ENTITY, AT LEAST 75% OF THE EMPLOYEES WHO OPERATE A TOW TRUCK MUST HOLD A CERTIFICATION FROM AN INDUSTRY RECOGNIZED CERTIFICATION PROGRAM FOR TOW TRUCK OPERATORS OR HAVE A MINIMUM OF 1 YEAR OF EXPERIENCE IN THE TOWING BUSINESS FOR HIRE IN MONTANA: YES  NO
17. UPON SATISFACTORY COMPLETION OF THE BUSINESS INSPECTION AND VERIFICATION OF THE INSURANCE REQUIREMENTS FILED WITH MHP, A DECAL SHOWING THE INSPECTION DATE MUST BE AFFIXED IN A PROMINENT PLACE ON THE TOW TRUCK'S LOWER RIGHT WINDOW CORNER: YES  NO
18. TOW OPERATOR REQUESTING A LETTER OF APPOINTMENT: YES  NO

**I hereby certify that the above information is true and correct.**

Owner/Corporate Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Trooper Conducting Inspection: \_\_\_\_\_ Date: \_\_\_\_\_

**TOW TRUCK INFORMATION WEBSITE:** <http://www.doj.mt.gov/enforcement/highwaypatrol/towtruck.asp>