



Finance Department □ 102 N. Neil St. □ Champaign, IL 61820

RELOCATOR REGISTRATION FORM

EFFECTIVE _____

FEE: \$25.00 PER YEAR

EXPIRATION DATE _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

ADDRESS OF STORAGE COMPOUND WHERE TOWED VEHICLES WILL BE KEPT:

LICENSE NUMBER AND DESCRIPTION OF EACH TOWING VEHICLE:

COMPANY OWNER'S NAME: _____

OWNER'S ADDRESS: _____

TELEPHONE NUMBER: _____

Note: This is an annual registration. You must register again with the City Clerk before the expiration date shown above. A certificate of insurance showing coverage on the above vehicles must be attached to this application.

Approved: _____

Traffic Services Officer