



TO: DEPARTMENT OF MOTOR VEHICLES, DEALERS AND REPAIRERS SECTION, 60 STATE STREET, WETHERSFIELD, CT 06161

BUSINESS NAME

BUSINESS ADDRESS

DEALER/REPAIRER LICENSE NUMBER	NUMBER OF WRECKERS	LIST WRECKER REGISTRATION PLATE NUMBERS
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ADDRESS OF STORAGE AREA IF DIFFERENT FROM BUSINESS ADDRESS

OPERATING HOURS OF STORAGE AREA

DAYS AND HOURS WHEN VEHICLE CAN BE CLAIMED BY CUSTOMER

IS THE STORAGE AREA PROPERLY ILLUMINATED <i>(Sufficient Light to Illuminate Storage Area)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO	IS THE STORAGE AREA FENCED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, DOES THE FENCE HAVE A LOCKED GATE? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF STORAGE AREA IS FENCED, TYPE OF FENCE		IF STORAGE AREA IS FENCED, HEIGHT OF FENCE

TYPE OF CONSTRUCTION OF BUILDING IN WHICH VEHICLES ARE STORED *(e.g., Wood, Cement, Brick, etc.)*

TYPE OF FIRE PREVENTION SYSTEM OR DEVICES *(e.g., Sprinkler System, Extinguishers, etc.)*

TYPE OF HEATING SYSTEM *(If Any)*

**STORAGE AREA**

ITEM	INSIDE BUILDING	OUTSIDE <i>(Fenced, Lighted, and Protected)</i>	OUTSIDE BUILDING
TYPE OF SECURITY ALARM OR SECURITY DEVICES <i>(Alarms, Guard, etc.)</i>			
NUMBER OF VEHICLES WHICH CAN BE STORED			

**STORAGE CHARGES PER 24 HR. PERIOD**

LENGTH OF VEHICLE	INSIDE BUILDING		OUTSIDE <i>(Fenced, Lighted, and Protected)</i>		OUTSIDE BUILDING	
	5 DAYS OR LESS	MORE THAN 5 DAYS	5 DAYS OR LESS	MORE THAN 5 DAYS	5 DAYS OR LESS	MORE THAN 5 DAYS
LESS THAN 20 FEET	<b>\$30.00</b> PER DAY	<b>\$37.00</b> PER DAY	<b>\$26.00</b> PER DAY	<b>\$31.00</b> PER DAY	<b>\$23.00</b> PER DAY	<b>\$25.00</b> PER DAY
20 FEET THROUGH 32 FEET	<b>\$35.00</b> PER DAY	<b>\$48.00</b> PER DAY	<b>\$30.00</b> PER DAY	<b>\$37.00</b> PER DAY	<b>\$25.00</b> PER DAY	<b>\$30.00</b> PER DAY
OVER 32 FEET	<b>\$43.00</b> PER DAY	<b>\$63.00</b> PER DAY	<b>\$35.00</b> PER DAY	<b>\$46.00</b> PER DAY	<b>\$30.00</b> PER DAY	<b>\$38.00</b> PER DAY

I HEREBY ATTEST TO THE FACT THAT I WILL COMPLY WITH THE STATE STORAGE RATES.

NAME OF LICENSEE *(Please Print)*

SIGNATURE OF LICENSEE

DATE SIGNED

X