



TOWING AND RECOVERY PROFESSIONALS OF MARYLAND, INC.

Membership Application

Firm/Trade Name _____

Business Address _____

Owner's Name/Representative _____

Mailing Address (if different from above) _____

Email Address _____

Telephone Numbers

Business _____ Personal _____

Business Fax _____ Cell Phone _____

Membership Level:

_____ Regular Member (Voting privileges – must be actively engaged in towing for hire)

_____ Associate Member (non-towers, suppliers, vendors – no voting privileges) ** Skip below to signature section

Name of Insurance Company _____

Number of Trucks for Hire _____

Are you interested in referrals from other members? Yes _____ No _____

Check the following equipment you offer:

Conventional Tow Truck: _____ Light Duty _____ Heavy Duty

Wheel Lift: _____ Light Duty _____ Medium Duty _____ Heavy Duty

Flatbed: _____ Light Duty _____ Medium Duty _____ Low Bed Trailer

Check the following services you offer:

_____ Bus Towing

_____ Air Cushions

_____ Diesel Available

_____ Storage Lot

_____ Auto Repair

_____ Tire Road Service

_____ Towing Equipment Sales

_____ 24 Hour Gas & Diesel

_____ Crane Services

_____ 24 Hour Repair

_____ Road Service

_____ Truck Repair

_____ Trailer Dollies

_____ Body Shop

_____ Repossessions

_____ Other (specify) _____

Do you honor/accept:

_____ Credit Cards

Service available to:

_____ Police

Member of:

_____ TRAA

_____ Personal Checks

_____ Public

_____ Local Towing Association

_____ Contracts

_____ Other Trade Associations

_____ Motor Clubs

_____ Subcontract

Signature (Owner/Agent/Corporate Officer)