



City of Dickinson  
Application for Wrecker Operator's License

Date \_\_\_\_\_

Operator's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Operator's Address \_\_\_\_\_

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

Employer's Name (Must be a licensed wrecker service.)

Personal Description of Applicant:

Age \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

Height \_\_\_\_\_ Race \_\_\_\_\_ Complexion \_\_\_\_\_

List other distinguishing characteristics (body and facial marks, defects):

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Are you a U.S. citizen?  yes  no

How long have you resided in the U.S.?

Have you ever been convicted of a felony?  yes  no

Have you ever been convicted of a misdemeanor?  yes  no

Have you ever been convicted of a moving violation?  yes  no

**If you answered "yes" to any of the last three questions, you must attach additional information regarding the conviction.**

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For Office Use Only

License Number \_\_\_\_\_ Date Issued \_\_\_\_\_