## **INVITATION TO BID**

In accordance with Municipal Code Section 2.60.080, SEALED BIDS will be received by the City of San Pablo at the City Clerk's Office until **May 1, 2023 at 2:00 P.M.,** at which time they will be publicly opened and read for performing work as follows:

The bid is for Tow Companies to contract for official police towing service with the City of San Pablo, in accordance with San Pablo Municipal Code Chapter 2.60 and the specifications contained herein. The tow companies which are retained will be a part of a list used for tow services on a rotational basis.

Bidders may obtain copies of bidding documents, including Municipal Code Chapter 2.60, at the San Pablo City Clerk's Office, 1000 Gateway Avenue, San Pablo CA 94806. Bidders may also reference San Pablo Municipal Code Chapter 2.60 online, at <a href="https://www.SanPabloCA.gov">www.SanPabloCA.gov</a>.

The successful bidder must ensure that its policies and practices provide equal opportunity to all applicants and employees without regard to race, color, creed, sex, age, religion, ancestry, citizenship, national origin, handicap, mental condition, veteran or marital status. The successful bidder must comply with the American with Disabilities Act.

Each bidder shall submit with its bid a statement setting forth its experience on the forms included in the Bid Proposal.

Bid forms received after the designated time will not be accepted.

No bidder may withdraw its bid for a period of sixty (60) days after the date set for the opening of bids.

The City reserves the right to reject any or all bids, and to waive any irregularities in the bids.

For information, please email Peggy Chou at <u>PeggyC@SanPabloCA.gov</u> or Sergeant David Hoff at <u>DavidH@SanPabloCA.gov</u>.

Initial <u>f</u>

#### **INSTRUCTIONS TO BIDDER**

- 1. Bids must be submitted on the form provided and sealed in the envelope supplied.
- 2. All bids shall be clearly and distinctly written without erasure or interlineations, and properly signed by an authorized party, who shall indicate the capacity in which the signature is executed.
- 3. Alternate bids are invalid unless invited and covered by the specifications.
- 4. All bids must be delivered to the designated recipient no later than the time specified on the front of this form.
- 5. No bidder shall submit more than one bid.
- 6. The City reserves the right to reject all bids if it is believed to be in the public interest.
- 7. The City reserves the right to waive any informalities or minor irregularities in connection with bids received.
- 8. The bid awardee may be required to attend a pre-award conference at a mutually acceptable time at which time all requirements of these specifications will be reviewed.
- The City of San Pablo reserves the right to make an award to any responsive and responsible bidder according to the criteria set forth in San Pablo Municipal Code Section 2.60.090.
- 10. This is a nonexclusive contract and the City may award this work to multiple tow companies. In the event more than one tow company is awarded police tow service, a rotation list will be established by the City to promote equitable distribution of requests for service.

# PLEASE READ CAREFULLY BEFORE SIGNING NEXT PAGE (P.3)

Page 3 is to be signed by authorized officer, partner or individual submitting the bid. Example – if bidder is:

- 1. An individual using a firm name, sign: "John Doe, an individual doing business as Blank Company."
- 2. An individual doing business under his/her own name, sign: your own name only "John Doe".
- 3. A co-partnership, sign: "John Doe and Richard Doe, co-partners doing business as Blank Co., by John Doe, co-partner."
- 4. A corporation, sign: "Blank Company, by John Doe, President (or other title)".

Initial Rw

# **BID TO THE CITY OF SAN PABLO**

BIDS MUST BE RECEIVED BY THE CITY CLERK, CITY HALL PRIOR TO 2:00 P.M. ON MONDAY, MAY 1, 2023.

FOR: APPOINTMENT AS AN OFFICIAL TOW SERVICE, TO INCLUDE POLICE IMPOUNDS, TRAFFIC ACCIDENTS, AND REMOVAL OF ABANDONED, WRECKED, DISMANTLED, OR INOPERATIVE VEHICLES FROM PRIVATE AND/OR PUBLIC PROPERTY.

,		
Name of Bidder: Jerri Wileox	Phone: <u></u>	158-3790
Type of Business:	510 - 77	95077
[ Corporation [ ] Co-partnership		
[ ] Individual doing business under own name		
[ ] Individual doing business using firm name		
Business Name: Olivers Tow	Inc	
Business Address:  2800 Radiant Au #A Kr. Street City	Showed PA	94801
Street City	State Z	ip Code
To the City of San Pablo:  The undersigned, as bidder, certifies that the or this bid as principals are those named herein as bidder collusion with any other person, firm, or corporation; the undersigned has examined the "instructions to bidders form contract attached to this bid packet; that the under this bid is accepted, the bidder will execute and fully peattached for which bids are specified in the contract, in prescribed, and according to the requirements as there will take in full payment therefore, the prices set forth in	r; that this is made wit at in submitting this b " and the specification ersigned proposes and erform the contract in the manner and time ein set forth; and that	hout id, the as and the I agrees if the form therein the bidder
Terri Wileox / Secretary	_	
Printed Name and Title		
Signature S. Willey	4-25	13
Signature	Date	

Initial Ru

# City of San Pablo

# BID SHEET FOR REMOVAL OF VEHICLES

To furnish the City of San Pablo with services for removal of vehicles, as required in accordance with provisions and specifications. "Normal business hours", for purpose of this section, is defined in San Pablo Municipal Code Section 2.60.130 to mean: Shall not be less than 8AM to 5PM Monday through Friday except for the following state recognized holidays: New Year's Day, Martin Luther King Jr. Day, Labor Day, Presidents' Day, Cesar Chavez Day, Memorial Day, Independence Day, Columbus Day, Veterans' Day, Thanksgiving Day, Day after Thanksgiving and Christmas Day.

The bid descriptions listed below are for evaluation purposes only. All proposed rates submitted by bidders may not exceed the maximum rates established by City Council on October 3, 2022 pursuant to Resolution 2022-146 (attached).

Description	Rates (Res	s. 22-146 max. rates)
Regular Tow - Class A	\$280.00	(\$280)
Regular Tow - Class B	\$365.00	(\$365)
Regular Tow - Class C	\$ 450.00	(\$450)
Regular Tow - Class D	\$ 535.00	(\$535)
Special Equipment – Forklift	\$ 225.00	(\$225)
Special Equipment – Converter Dolly	\$ 425.00	(\$425)
Special Equipment – Recovery Straps	\$ 150.00	(\$150)
Special Equipment – Tow with Dolly	\$ 270.00	(\$225)
Special Equipment – Motorcycle	\$ 23000	(\$270)
Special Equipment – Big Rig Trailer	\$ 485.00	(\$485)
Special Equipment – Recreational Vehicle Class A -	\$ 1700.00	(\$1700)
Special Equipment – Recreational Vehicle Class B -	\$ 1500.00	(\$1500)
All Rates per hour		

Initial \_\_\_\_\_

Daily Storage Fee - Regular To	ow -	•		\$	135.00	_ per day (\$135)
Daily Storage Fee - Big Rig -		•	-	\$	155,00	_ per day (\$155)
Additional Fee – Big Rig	Trailer -		-	\$	155.00	_ per day (\$155)
After-Hours Gate Fee – Regula After-Hours Gate Fee – Big Rig Please explain when "Af GATE FEE'S Apply A	ı ter-Hour	- s" Gate		vill appl		per call (Half the Tow Rate) per call (Half the Tow Rate)  WYS, (WELLEY & S
San Pablo Police Rates		,				
City Service Call - Tow, SPPD	Evidenc	e Tow,	etc.	\$	110.00 per	per eall (\$110)
Daily Storage Charge	-		-	\$	40.0	_ per day (\$40)
City Vehicle Tire Change	-	**	-	\$	85.00 \$35°°	per call (\$35) 2.60.080 (D)(10)
Describe any other fees:						
٠, (				\$	4.1	
				\$		
Fanada an and Valenta and Valenta	I			\$		
Fees that are not listed cannot	de charg	zea.				

# Please provide the following information per the San Pablo Municipal Code 2.60.080.:

	Name and Address of person to receive all City notices:
	Randy + Terri Wilcox 2431 Collins Ave. Pixole, CA 94564
2.	To what extent are you willing to offer free or reduced-price service for City vehicles?
3.	Copy of current permit certification by CHP attached: (Yes/No) NO - IN Process OF IN
4.	Business Hours of Operation (sufficiently staffed per Municipal Code Section 2.60.130):
	OFFice M-F 8AM-Spm except holiday / Towing 24/7
5.	Will you provide service 24 hours a day 24 hours/day, 7 days/week, every day of the year (including holidays), per Municipal Code Section 2.60.130? (Yes/No)
6.	Have you or any of your personnel been refused a towing permit or contract, or had such revoked or suspended by any city or county? (Yes/No)
7.	Valid city business license attached: (Yes/No)
8.	Copy of current insurance policies attached: (Yes/No)

# **REFERENCES**

Must contain **at least three (3)** verifiable references: persons, government agencies, or companies who know your work.

NAME	ADDRESS	PHONE	
O CHP	3601 Selegraph Aul	Oakland, A	510 450.3821
Jennifer	Kennedy		
Pinole PD	880 Jenent Aug	Pinde, A	510 724-1111
Justin	Rogers		
MCHP	5001 Blum Rel	Martinez, A	925-646-4980
Officer.	2 /		
	STATEMENT OF PERSONNEL	EXPERIENCE	
The following is a driver's license nu	list of personnel (including a record	l of each person's expe	rience and
NAME	YEARS OF EXPERIENC	E DRIVERS LICI	ENSE NO.
	see Attachment		

# STATEMENT OF PROPOSED TOW TRUCKS, ADDITIONAL EQUIPMENT, AND STORAGE FACILITIES

I state that the following is a complete and accurate list of all proposed tow trucks, equipment, and storage facilities.

# **TOW TRUCKS:**

Please list: Year, Make/Model, Description, Tonnage, License, and VIN
See Atachment
DESCRIPTION OF TOW DOLLIES AND OTHER ADDITIONAL EQUIPMENT:
Tow dollies only used with Wricher
Tow dollies only used with Wricher  Tow skates used on all wheel drive or tires  are turned or no wheels 4 tires
are turned or no wheels a tipes
ADDRESS AND ZONING DESIGNATION OF STORAGE FACILITIES:
2800 Radiant Ave # A Richmond, ch 94801
2800 Radiant Ave # A Richmond, lA 94801
SIZE OF STORAGE LOT: 7.33 Areis
<ul> <li>□ I have a crusher on the property</li> <li>□ I have access to a crusher at the following address:</li> </ul>

## STATEMENT REGARDING WORKERS' COMPENSATION INSURANCE

I am aware of the provisions of Section 3700 of the Labor Code which requires every employer to be insured against liability for Workers' Compensation or to undertake self-insurance in accordance with the provisions of that Code, and I will comply with such provisions before commencing the work of this contract.

Signature:	1. Wilong	Date:	4-25-23
STATEMENT REGAR	RDING COMPLIANCE WITH	OSHA	
California Occupation to be accomplished pube limited to, all applic of California. In the eviolation of OSHA in pursuant to this contra of such violation.	be responsible for strict cor al Safety and Health Act (OS ursuant to this contract. OSHA cable safety orders issued by event the Contractor, or any or on the premises on which act, the Contractor shall imme	SHA) which are appli A shall be construed the Division of Indus of his employees, s th the Contractor is	cable to the work to include, but not trial Safety, State shall observe any to perform work
Signature:	Weley	Date:	4.25-23
STATEMENT REGAR	RDING CITY BUSINESS LIC	ENSE AND OPERA	TOR PERMIT
truck operator's permit contract, I/we will eithe	ave a current business licens t from the San Pablo Police D er have, or will obtain, a City o it prior to commencing any wo	epartment. I state th of San Pablo busines	at, if awarded the ss license and tow
Signature:	Wiley	Date:	4.25.23
<b>25.115.11.5.2</b>			

#### **GENERAL PROVISIONS**

The contract identifies the official police tow service, including towing of abandoned, wrecked, dismantled, or inoperative vehicles from private and/or public property.

## **CONTRACT PERIOD**

The contract shall remain in effect for a period of 5 years from the date of issue.

# **<b>PAYMENT**

The plate number and vehicle description shall be submitted to the Police Department Records Division on the 15<sup>th</sup> of each month.

In the event that a towed vehicle is reclaimed by its owner, the City is <u>not</u> responsible for the tow fee. The vehicle owner shall be liable for any tow and/or storage fees. (No vehicle is to be released without prior authorization of the San Pablo Police Department).

Tow fees for high-value vehicles (\$1,000.00 or more) shall be recovered by lien sale.

#### MINIMUM LIMITS OF INSURANCE

During the term of this Agreement, Contractor shall maintain at its own cost and expense the insurance coverage as set forth in the form agreement attached to this bid packet..

#### RESPONSIBILITY FOR CLAIMS AND DAMAGES

Contractor shall indemnify, save and hold harmless from and defend the City, its officers, agents and employees, against any and all claims, costs, demands, causes of action, suits, losses, expense or liability arising from, or alleged to have arisen, from any acts or omissions of Contractor, its agents, sub-contractors, officials or employees, in connection with the execution of the work covered by this Agreement, as it may be amended, except for the sole negligence or willful misconduct of City. This entire indemnification provision shall survive termination or cancellation of this Agreement.

#### SPECIFIC REQUIREMENTS

By nature of the type of tow service needed for abandoned vehicles, the following is required:

- 1. Must adhere to San Pablo Municipal Code Sections 2.60.010 to 2.60.170, as amended from time-to-time.
- 2. Must have a response time of twenty (20) minutes or less. If this requirement cannot be met, the tow company will be placed at the bottom of the rotation list.
- 3. Must have competent and experienced tow drivers.
- 4. Must not use force, violence, threats of force or violence to enter upon private property to remove the vehicle(s) or parts thereof if entry to the property is denied by the person having possession thereof. If entry is refused by such person, driver agrees to immediately notify the San Pablo Police Department of such refusal.

Initial Rw

- 5. Must have a sufficient tow vehicle fleet (minimum of 2 tow trucks) to effect removal of abandoned, wrecked, dismantled or inoperative vehicles; must further agree to comply with the California Vehicle Code in maintaining said vehicles and allow inspection of vehicles upon reasonable notice.
- ② In addition to the requirements in number 6, all tow companies will be required to submit to the City annually a completed and satisfactory CHP 234B, Tow Truck Inspection Guide.
- 7. Must have the ability and willingness to tow abandoned vehicles, including but not limited to passenger vehicles, vans, buses, RV's, trailers and utility vehicles.
- 8. Must have the ability to tow abandoned vehicles removed under the terms of the attached Agreement. All storage facilities must comply with all City/County Ordinances and EPA requirements (this includes but is not limited to the lawful disposal of toxics, such as batteries, oil, anti-freeze, and gasoline). Facilities are subject to inspection upon reasonable notice by the City. No vehicles or parts thereof shall be stored upon the public right-of-way or upon City property.
- Must have access to a crusher, either permanent or portable. It is agreed that all vehicles removed by said operator shall be scrapped or demolished at a place and in the manner required by all applicable laws and regulations and will not be reconstructed or made operable, except as provided by California Vehicle Code Section-22661(f) or successor statute.
- 10. Must agree that in consideration for the aforementioned services to be performed, Contractor shall be entitled to the salvage value of the scrapped or demolished vehicle(s) or parts thereof. The cost of performing said services shall be borne solely by the Contractor and any cost or portion thereof incurred by the Contractor shall not be allocated to the City.

## **GROUNDS FOR REVOCATION OR MODIFICATION OF CONTRACT**

Contract may be revoked or modified for non-compliance with San Pablo Municipal Code sections 2.60.010 to 2.60.150, as may be amended from time to time, or the general or specific conditions listed above. The contract holder shall be given at least ten days' notice to appear before the City Council to show cause why the contract should not be revoked or modified.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/23/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PROD	JCER	CONTAC NAME:	T					
G.L. Anderson Ins Srvs Inc			NAME: PHONE (A/C, No, Ext): 916-353-5130 (A/C, No): 916-353-5135					
an affiliate of Professional Ins Assoc 193 Blue Ravine Rd, Suite 210			E-MAIL ADDRESS: certificates@glandersonins.com					
Folsom CA 95630			INSURER(S) AFFORDING COVERAGE				NAIC #	
	·	INSURE			I Insurance Con	npany		36234
INSUR		INSURE	RB:			-		
	er's Tow, Inc.	INSURE						
	D Radiant Ave #A Imond CA 94801	INSURE						
1 (101)	mond on broom	INSURE						
		INSURE	9.10.20					
COV	ERAGES CERTIFICATE NUMBER: 17385221				REVISION NU	MBER:		
THI	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAV	VE BEEN	N ISSUED TO	THE INSURE	D NAMED ABOV	/E FOR TH	IE POL	ICY PERIOD
CE	DICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OR RTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE	ED BY 1	THE POLICIES	S DESCRIBED	) HEREIN IS SU	H RESPEC	ALL T	WHICH THIS THE TERMS,
INSR LTR	TYPE OF INSURANCE ADDL SUBR INSD WYD POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	3	
LIK	COMMERCIAL GENERAL LIABILITY		(MINI/DD/1111)	(MINI/DD/1111)	EACH OCCURREN	ICE	\$	
	CLAIMS-MADE OCCUR	1			DAMAGE TO REN' PREMISES (Ea occ	TED	\$	
					MED EXP (Any one	person)	\$	
					PERSONAL & ADV	INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGRE	GATE	\$	
	POLICY PRO- JECT LOC				PRODUCTS - COM	IP/OP AGG	\$	
	OTHER:				COMBINED SINGL	FLIMIT	\$	
	AUTOMOBILE LIABILITY				(Ea accident)		\$	
	ANY AUTO ALL OWNED SCHEDULED				BODILY INJURY (F		\$	
-	AUTOS AUTOS NON-OWNED			,	BODILY INJURY (F	and the same of th		
-	HIRED AUTOS AUTOS				(Per accident)	OL.	\$	
							\$	
-	UMBRELLA LIAB OCCUR				EACH OCCURREN	ICE	\$	
-	EXCESS LIAB CLAIMS-MADE				AGGREGATE		\$	
A	DED   RETENTION \$   WORKERS COMPENSATION   ON1285801		5/1/2022	5/1/2023	X PER STATUTE	OTH- ER	\$	
, "   <i>t</i>	AND EMPLOYERS' LIABILITY		3/ 1/2022	3/1/2023			• • • • • •	
	ANY PROPRIETOR/PARTNER/EXECUTIVE N / A N / A				E.L. EACH ACCIDE		\$ 1,000,	
l li	Mandatory in NH) f yes, describe under				E.L. DISEASE - EA	54525350000	Service and	
	DÉSCRIPTION OF OPERATIONS below				E.L. DISEASE - PO	LICT LIMIT	\$ 1,000,	000
DESCI Evide	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Evidence of Workers Compensation Coverage							
CER	TIFICATE HOLDER	CANC	ELLATION					
	City of San Pablo Police Department	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
13880 San Pablo Ave San Pablo CA 94806			AUTHORIZED REPRESENTATIVE  Jump Marker					



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/21/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: **PRODUCER** R.A. Storelee Insurance Agency PHONE (A/C, No. Ext): E-MAIL ADDRESS: PRODUCER Rob Storelee 321 First Street Suite 201 Benicia, CA 94510 Robert A. Storelee CUSTOMER ID #: OLIVE-2 INSURER(S) AFFORDING COVERAGE NAIC# Oliver's Tow, Inc. INSURER A: Accredited Surety and Casualty 26379 INSURED PO Box 20663 INSURER B : El Sobrante, CA 94820 INSURER C: INSURER D : INSURER E INSURER F **REVISION NUMBER: COVERAGES CERTIFICATE NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR INSR WVD POLICY EFF (MM/DD/YYYY) TYPE OF INSURANCE LIMITS POLICY NUMBER **GENERAL LIABILITY** 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 100,000 11/28/2023 1 TTS CA 19 01257180-02 11/28/2022 X COMMERCIAL GENERAL LIABILITY \$ 5,000 CLAIMS-MADE | X | OCCUR MED EXP (Any one person) 1,000,000 X Contractual Liab. \$ PERSONAL & ADV INJURY 2,000,000 GENERAL AGGREGATE 2,000,000 \$ PRODUCTS - COMP/OP AGG GEN'L AGGREGATE LIMIT APPLIES PER: PRO-JECT \$ POLICY LOC COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY X 1,000,000 \$ (Ea accident) ANY AUTO BODILY INJURY (Per person) \$ ALL OWNED AUTOS BODILY INJURY (Per accident) \$ 1 TTS CA 19 01257180-02 11/28/2022 11/28/2023 X SCHEDULED AUTOS PROPERTY DAMAGE s (PER ACCIDENT) X HIRED AUTOS \$ X NON-OWNED AUTOS \$ UMBRELLA LIAB **EACH OCCURRENCE** OCCUR **EXCESS LIAB** CLAIMS-MADE **AGGREGATE** \$ \$ DEDUCTIBLE \$ RETENTION WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT N/A E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 500/2500ded 1 TTS CA 19 01257180-02 11/28/2022 11/28/2023 300,000 Garagekeepers 11/28/2022 11/28/2023 250,000 \$1,000 Ded On Hook/Cargo 1 TTS CA 19 01257180-02 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
On Hook Lgt/Med \$100,000; Heavy \$250,000.
Towing & Road Service Operations, CITY OF SAN PABLO, ITS OFFICERS, OFFICIALS
EMPLOYEES AND VOLUMEERS ARE ADDITIONAL INSURED ONLY WITH RESPECTS TO LIABIL
ARISING FROM THE OPERATIONS OF THE NAMED INSURED CERTIFICATE HOLDER CANCELLATION SANPAPD SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. San Pablo Police Dept. 13880 San Pablo Ave AUTHORIZED REPRESENTATIVE San Pablo, CA 94806

© 1988-2009 ACORD CORPORATION. All rights reserved.

This certificate is issued without verification that the holder is subject to or exempted from licensing by the state, county, federal government, or any other governmental agency.

# CITY OF SAN PABLO **BUSINESS LICENSE CERTIFICATE**

1000 Gateway Avenue San Pablo, CA 94806 (510) 215-3030

Sales or use tax may apply to your business activitites. You may seek written advice regarding the application of tax to your particular business by writing to the nearest State Board of Equalization office.

LICENSE NUMBER: BL1027

EXPIRES: 01/31/2024

OWNER: Randy Wilcox

**BUSINESS NAME:** 

**OLIVERS TOWING** 

BUSINESS ADDRESS: 2800 Radiant Ave Suite A

TYPE OF BUSINESS: TOWING

TYPE OF LICENSE:

unspecified

MAILING ADDRESS:

**OLIVERS TOWING** P.O. BOX 20663 EL SOBRANTE, CA 94820



This license evidences that the person (s), firm or corporation named herein has paid the applicable tax required by the City of San Pablo Municipal Code for the person indicated above. No license issued under provisions of Chapter 5 of San Pablo Municipal Code shall be construed as authorizing the conduct or continuance of any illegal or unlawful operation in violation of any City Ordinance related thereto.

#### **DEPARTMENT OF MOTOR VEHICLES**

Registration Operations Division MS H875 P.O. BOX 932370 Sacramento, CA. 94232-3700 (916) 657-8153

06/13/2022



OLIVERS TOW INC PO BX 20663 EL SOBRANTE, CA 94820

# DEPARTMENT OF MOTOR VEHICLES A Public Service Agency

# **MOTOR CARRIER PERMIT**

#### DEPARTMENT OF MOTOR VEHICLES

Registration Operations Division

P.O. BOX 932370 Sacramento, CA. 94232-3700

OLIVERS TOW INC PO BX 20663 EL SOBRANTE, CA 94820

Pmt Date:	04/18/2022	Office #:	154
Account #:	384560	Tech ID:	R2

Account #: 384560 Tech ID: R2

Sequence #: 0042 Amt Paid: \$727.00

 Valid From:
 05/01/2022
 Valid Through:
 04/30/2023

CA#: 0253532

The carrier named on this permit, having made written application to the Department of Motor Vehicles for a permit to operate as a motor carrier of property as defined in vehicle code section 34601, and having met the requirements and paid the appropriate fees, is granted a permit of the following classification:

For Hire Full Year Corporation

!!!IMPORTANT REMINDERS!!!

- 1. Your permit will expire at midnight on the 'Valid Through' date. If you do not receive a renewal notice 30 days prior to the expiration date, please submit an original application and check the "Renewal" box.
- 2. Your insurance must remain valid through the term of your permit or a suspension action could occur.
- 3. Changes to your fleet are not required to be reported until your renewal.
- 4. Changes to your business entity may require a new CA# and application for another Motor Carrier Permit.
- 5. If you decide to no longer operate as a motor carrier of property, you must submit a 'Voluntary Withdrawal' form.
- 6. For changes to the address, business name, officers, or authorized representative's name, please complete the 'Notice of Change' form. Changes during your renewal period may be submitted on your renewal application.
- 7. You may download forms from the Internet at www.dmv.ca.gov or receive further information by calling: (916) 657-8153.

California Relay Telephone Service for the Deaf or Hard of Hearing from TDD Phones: 1-800-735-2929; from Voice Phones: 1-800-735-2922

\* NEW CATHCHE TO FOLLOWS