**TRESPASS TOWING/IMMOBILIZATION AGREEMENT**

**PROPERTY INFORMATION**

PROPERTY NAME: Click here to enter text.

PROPERTY ADDRESS: Click here to enter text.

PROPERTY OWNER/AUTHORIZED AGENT NAME: Click here to enter text.

PHONE NUMBER: Click here to enter text. EMAIL ADDRESS: Click here to enter text.

***BILLING ADDRESS (IF DIFFERENT FROM ABOVE):***

NAME: Click here to enter text.

ADDRESS: Click here to enter text.

CITY, STATE, AND ZIP CODE: Click here to enter text.

**TOWING/IMMOBILIZATION SERVICES PROVIDER**

SERVICE PROVIDER COMPANY NAME: Click here to enter text.

SERVICE PROVIDER ADDRESS**:** Click here to enter text.

**VALIDITY PERIOD OF THIS AGREEMENT**

START DATE: Click here to enter a date.

END DATE: Click here to enter a date.

\*\*\*\*\*The time period of this agreement is not to exceed one year\*\*\*\*\*

**TOWING/IMMOBILIZATION SERVICES INFORMATION**

**CHECK BELOW ON ANY SERVICES BEING PROVIDED THAT APPLY**

**IMMOBILIZATION** - PLACING A DEVICE ON A VEHICLE WHICH DISABLES ITS NORMAL OPERATION OR MOVEMENT.

**CHECK DESIRED DAYS/HOURS FOR IMMOBILIZATION:**

A) SUN MON TUE WED THU  FRI SAT  **7 DAYS A WEEK**

B) BETWEEN THE HOURS OF: Click here to enter text. AND Click here to enter text. OR  **24 HOURS/DAY**

**ROAM TOWS** - REMOVAL OF VEHICLES UNDER THE PREDETERMINED CIRCUMSTANCES SET FORTH BELOW BY PROPERTY OWNER/AGENT

**CHECK DESIRED DAYS/HOURS FOR ROAM TOWING:**

A) SUN MON TUE WED THU  FRI SAT  **7 DAYS A WEEK**

B) BETWEEN THE HOURS OF: Click here to enter text. AND Click here to enter text. OR  **24 HOURS/DAY**

**CALL-IN TOWS** - REMOVAL OF VEHICLES WHEN CALLED BY OWNER/AUTHORIZED AGENT OF SAID

PROPERTY (IES). OWNER/AGENT RESERVES THE RIGHT TO REQUEST A CALL-IN TOW AT ANY TIME.

THIS IS ALWAYS THE DEFAULT OPTION FOR ANY PRIVATE REAL PROPERTY WITH A TOWING AGREEMENT.

**CHECKLIST**

**The following items on the checklist below must be completed and/or attached in**

**order to process this agreement.**

COMPLETED TRESPASS TOWING/IMMOBILIZATION AGREEMENT

ATTACHED MAP OR LEGAL DESCRIPTION OF THE PROPERTY

RESIDENTIAL PROPERTIES MUST ATTACH COPY OF LEASE OR ANY ADDENDUM NOTIFYING TENANTS THAT THE RESIDENTIAL PROPERTY UTILIZES ROAM TOWING

PAYMENT FOR TRESPASS TOW PERMIT ATTACHED

**\*\*\* The administrative fee can only be paid by the Property Owner or Authorized Representative\*\*\***

**SIGNATURES**

*IF PROPERTY OWNERSHIP/MANAGEMENT CHANGES, THE PROPERTY OWNER/AGENT IS REQUIRED TO NOTIFY THE GAINESVILLE POLICE DEPARTMENT AND THE CONTRACTED TOW/IMMOBILIZATION COMPANY IN WRITING WITHIN 24 HOURS. A NEW COMPLETED AGREEMENT AND APPLICATION FEE MUST BE SUBMITTED TO THE GAINESVILLE POLICE DEPARTMENT BEFORE TOWING WILL BE AUTHORIZED BY ANOTHER COMPANY****.***

*THIS AGREEMENT IS NOT VALID UNTIL ALL FORMS ARE PROPERLY COMPLETED AND THE ADMINISTRATIVE FEE AS SET FORTH IN APPENDIX A SCHEDULE OF FEES, RATES, AND CHARGES OF THE GAINESVILLE CODE OF ORDINANCES FOR EACH PROPERTY LOCATION IS PAID BY THE* ***PROPERTY OWNER****.* ***THE ADMINISTRATIVE FEE IS TO BE PAID ANNUALLY.***

*BOTH THE PROPERTY OWNER/MANAGER AND AUTHORIZED REPRESENTATIVE CERTIFY THAT THEY HAVE READ AND ARE IN COMPLIANCE WITH FLORIDA STATUTE 715.07 AND CHAPTER 14.5, ARTICLE III OF THE GAINESVILLE CODE OF ORDINANCES.*

Click here to enter text. Click here to enter text.

PRINT NAME PRINT NAME

PROPERTY OWNER/AGENT SIGNATURE TOW/IMMOBILIZATION AGENT SIGNATURE

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_