

City of Annapolis Office of the City Clerk

Office of the City Clerk 160 Duke of Gloucester Street Annapolis, MD 21401-2517



CityClerk@annapolis.gov • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Towing License Application

City Code Section 7.52.040

Applicant <u>CARLOS EVANS</u>					
Resident address 833-C/Tftow Ave Arnold, Md. 21012					
Telephone, day 443-597-7685					
Trading as Top Notch TowIng And Transport WC.					
Business address 2045 Herndon Dr. Annapolis, Md. 21401					
Telephone, day 4/0-224-4808					
Storage location 2045 HETN dow DT, ANNAPOLTS, Md. 21401					
Vehicle License plate number Vehicle Identification Number (VIN)					
1 18900TT IHTMNAALOGH 320854					
2 15048TT 1FDXF 46P36ED11292					
3 13670TT 5PVNJ8JN982550011					
4 10254TT 1HTSCAAM7YH311903					
5					
6					
7					
I hereby certify under the penalties of perjury that: 1. I am not directly or indirectly financially interested in any other towing license issued by the City of Annapolis;					
I have reviewed and will charge the standard towing and storage fees approved by the City Council; and					
·					
3. I have filed a Twenty-Five Thousand (\$25,000) bond with the Annapolis City Clerk to protect the owner of any automobile from any property damage occurring while it is in my possession.					
· ·					
Signature Contra					
FOR CITY USE ONLY Dept. Sent Returned Approved Disapproved Signature					
Chief of Police 5/7/19 5/9/19 L See attached					
Council					



QUOTE & ISSUE BOND DOCUMENTS

Thank you for purchasing a bond through Quote & Issue. The enclosed package is a complete set of the documents required for the bond. The completed bond form and a transaction receipt are included. A Power of Attorney form specific to this bond and any indemnity agreement documents will be included when they are required. If you provided an e-mail address, a copy of these documents will be sent to the e-mail address.

Please verify the accuracy of all documents. For immediate changes or corrections, contact an Underwriting Assistant toll free at 888-844-2663. The National Bond Center can also be reached by fax at 866-547-4883 or by e-mail at bonds@libertymutual.com.

Print a copy of this package and use the following checklist to ensure the documents are properly signed and distributed.

Bond Form

if ar	ry, must be acknowledged (notarized) or witnessed. Signatures should always match the ted name.
	The applicant must sign the bond. If the applicant is a corporation, partnership or LLC, any officer of the company may sign the bond.
	The designated attorney-in-fact should sign the bond.
	If the bond does not have a graphical signature of the Liberty Mutual Surety president, it must be signed by the attorney-in-fact, and a separate Power of Attorney (POA) document is required by the obligee.
Indemnity Ag	reement and Addendum (if included)
	parties, including spouses, must sign the indemnity agreement and addendum documents a cated. Refer to the Signature Instructions on page 2.
usin	se return the two page signed agreement and addendum (if applicable) within 14 days by g one of the following methods: Mail to Liberty Mutual National Bond Center, 350 E 96th Street, Indianapolis, IN 46240 E-mail to bonds@libertymutual.com Fax to 866-547-4883
Transaction R	<u>eceipt</u>
☐ Keep	o for your records as a statement of the total amount owed or paid.
Distribute All	Forms
	ss otherwise indicated on a form, send the completed bond materials to the Obligee inization requiring the bond) listed on the Transaction Receipt.



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Bond 32S577175 KNOW ALL BY THESE PRESENTS, That we, TOP NOTCH TOWING AND TRANSPORT LLC as Principal, of 2045 Hearndon Drive (Street and Number) and the The Ohio Casualty Insurance Company Annapolis (City) , a New Hampshire corporation, as Surety, are held and firmly bound unto CITY OF ANNAPOLIS , as Obligee, in the sum of Twenty-five Thousand Dollars And Zero Cents (\$25,000.00) for which sum, well and truly to be paid, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents. Sealed with our seals, and dated this 1st day of July THE CONDITION OF THIS OBLIGATION IS SUCH, That WHEREAS, the Principal has been or is about to be granted a license or permit to do business as Police Towing by the Obligee. NOW, THEREFORE, if the Principal well and truly comply with applicable local ordinances, and conduct business in conformity therewith, then this obligation to be void; otherwise to remain in full force and effect. PROVIDED, HOWEVER: 1. This bond shall continue in force: ☐ Until 30th day of June , 2019 , or until the date of expiration of any Continuation Certificate executed by the Surety OR. Until canceled as herein provided. 2. This bond may be canceled by the Surety by the sending of notice in writing to the Obligee, stating when, not less than thirty days thereafter, liability hereunder shall terminate as to subsequent acts or omissions of the Principal. TOP NOTCH TOWING AND TRANSPORT LLC Principal

The Ohio Casualty Insurance Company

Timothy A. Mikologenski

Timothy A. Mikolajewski, Assistant Secretary



APPLICATION FOR QUOTE & ISSUE BOND

Entity: ☐ Individual ☐ Partnership ☐	Sole Propriet	orship 🗌 Co	orporat	ion 🛮 LLC				
	,	APPLICA	NT ···					
NAME & TRADE NAME (IF ANY)						Р	HONE NUM	IBER
TOP NOTCH TOWING AND TRANSPORT LLC						- 10	(443) 597-7685	
BUSINESS ADDRESS		CITY			STAT	E Z	ZIP CODE	
2045 Hearndon Drive		Annapolis			ME		21401	
BILLING ADDRESS DIRECT BILL		CITY			STAT	E Z	IP CODE	
		Annapolis			ME) [21401	
Has applicant, or have any of its principals, ever fasurety claims proceedings?		ss, compromised se explain on se				kruptcy (or	
		BOND REQU	IRED					
OBLIGEE							В	OND AMOUNT
CITY OF ANNAPOLIS							\$	25,000.00
ADDRESS		CITY	CITY			STATE ZIP COD		DDE
160 Duke of Gloucester Street		Annapolis				MD	21401	
DESCRIPTION OF BOND	TYPE			TERM	EFFEC	TIVE DATE		
Police Towing		Contractors	Contractors License Bonds			N/A	July	1, 2018
GIVE THE FOLLOWING INFORMATIO	N ON EACH	OWNER, PA	RTNE	R OR STO	CKHOLDER	, INCL	UDING	YOURSELF
NAME	s	SOCIAL SECURITY N	UMBER	NAME OF SPOU	SE			
CARLOS EVANS	2	220-84-2431						
RESIDENCE ADDRESS	<u>'</u>		CITY				STATE	ZIP CODE
833 Clifton Avenue			Arnolo	i			MD	21012
EQUITY IN REAL ESTATE YEARS EXPERIENCE				% OWNERSHIP				
					1%			
NAME	s	SOCIAL SECURITY N	UMBER	NAME OF SPOU	3E			
RESIDENCE ADDRESS CITY STATE ZIP CODE					ZIP CODE			
EQUITY IN REAL ESTATE	YEARS EXPERI	ENCE			% OWNERSHIP		1	
	INDE	MNITY AGR	FEME	NT			*****	

The undersigned (collectively "Indemnitor") represents that all statements made in this Application and in any Application Supplement are true and made without reservation to induce Liberty Mutual Insurance Company and any other company that is part of or added to the Liberty Mutual Group, severally not jointly, and/or for which surety business is underwritten by Liberty Mutual Surety ("Surety") to extend surety credit in any manner, including but not limited to providing or having provided requested Bond(s) in reliance upon the provision of its indemnity, and hereby agrees with Surety, its successors and assigns, as follows:

to pay premiums when due:

- to deliver evidence satisfactorily to Surety, of the release of all liability; to exonerate and indemnify Surety from and against all claims, losses, liability, damages of any type (including punitive), costs, fees, expenses, suits, orders, judgments, or adjudications whatsoever which Surety may incur in any manner related to the extension of surety credit, including the enforcement of the agreements contained herein and any matter subject to any bankruptcy court (collectively "LOSS");
- That Surety shall have the right, at its sole discretion, to pay, adjust, settle or compromise any LOSS and the voucher or other evidence of such payment, settlement or compromise, whether Surety was liable therefore or not, shall be prima facie evidence of the fact and extent of Indemnitor's liability; to place Surety in funds immediately upon demand, the amount Surety deems necessary to protect itself from any LOSS or potential LOSS, whether
- or not Surety has made payment or posted a reserve, Surety having the right to use all or part of these funds in payment or settlement of any LOSS or in reimbursement to Surety for payment of same;
- that Indemnitor hereby authorizes Surety to investigate statements made herein and to check credit with creditors and/or lending institutions, and further authorizes any present or former employer or any other person, firm or corporation, to furnish information concerning Indemnitor in connection with the Surety's extension of surety credit and with Indemnitor's compliance with obligations hereunder and under any Bond or underlying obligation, and Indemnitor hereby releases any of the aforementioned from liability in consequence of furnishing or disclosing such
- that Surety may bring separate suits to recover hereunder as causes of action shall accrue and that the bringing of suit or recovery of judgment upon any cause of action shall not prejudice or bar the bringing of other suits upon other causes of action, whether heretofore or thereafter arising; that and all other rights which Surety may have or acquire against Indemnitor under other or additional agreements of indemnity or any other written
- agreement (with this Agreement collectively "INDEMNITY") related to the extension of surety credit, shall be in addition to and not in lieu of the rights afforded Surety under this Agreement;
- that if Surety executes any Bond(s) with any cosurety or reinsures all or any part of any Bond(s), that all the terms of this Agreement shall apply and operate for the benefit of such cosurety and reinsurer, as their interests may appear;

 10) that these covenants shall be jointly and severally binding upon Indemnitor, its respective heirs, executors, administrators, successors and assigns;
- that Surety shall have the right to decline to issue or to cancel Bond(s) at any time, free of claim for loss or damage by Indemnitor, and Surety shall be under no obligation to disclose its reasons therefore, the provisions of any law to the contrary being hereby walved;

- 12) that the exercise, delay of or failure by Surety to exercise of any right, remedy or power whatsoever shall not preclude Surety's simultaneous or subsequent exercise or constitute any waiver of such or other rights, remedies or powers;

 13) if any Bond(s) cover the replacement of lost securities, Indemnitor will at its own cost, promptly deliver said securities to Surety if said securities
- come under Indemnitor's control or possession;

 14) that if any Bond(s) relate to the assets of an estate, Indemnitor will provide reasonable access to all records concerning the estate and upon request that if any Bond(s) relate to the assets of an estate, Indemnitor will provide reasonable access to all records concerning the estate and upon request shall provide a written report of the condition of the estate. Furthermore, Indemnitor grants, assigns, pledges and conveys to Surety as security, a lien on and security interest in and to Indemnitor's interest, title and rights in the proceeds of any insurance policy affording coverage for all or part of any bonded obligation, and in the contracts or obligations (and all proceeds thereof without limitation) that grow in any manner whatsoever as a result of the extension of surety credit. While the lien and security interests are effective immediately, Surety may exercise its remedies with respect to such only in the event of: a) Indemnitor's failure to fulfill any obligation whatsoever for which i) Bond(s) are provided, ii) contained in any Bond(s), or iii) contained within any INDEMNITY agreement with the Surety; and b) any assignment by Indemnitor for the benefit of creditors or any agreement or proceeding of liquidation, receivership or bankruptcy whatsoever. Indemnitor hereby authorizes Surety to file any such financing statement as Surety deems pecessary or appropriate to perfect the liens and security interest granted herein. statement as Surety deems necessary or appropriate to perfect the liens and security interest granted herein.

With respect to Court Bonds and Receiver/Trustee Bonds: INDEMNITORS ACKNOWLEDGE AND AGREE THAT THE FIRST YEAR PREMIUM IS FULLY-EARNED WHEN THE BOND IS ISSUED EVEN IF THE BOND IS SUBSEQUENTLY REDUCED OR TERMINATED DURING THE FIRST YEAR. IF A BOND IS REDUCED OR TERMINATED DURING THE SECOND OR SUBSEQUENT YEAR AFTER A RENEWAL PREMIUM IS PAID, THE RENEWAL PREMIUM SHALL BE ADJUSTED PRO RATA UPON REDUCTION OR TERMINATION. Signed and dated this 1st day of July If INDIVIDUAL or SOLE PROPRIETORSHIP, sign here: Individual Witness If PARTNERSHIP, sign here: Partnership Name Partner Witness Partner Witness If CORPORATION, sign here: (SEAL) Name of Corporation Attest President If LLC, sign here: TOP NOTCH TOWING AND TRANSPORT LLC Name of LLC Attest Attest Member SIGNATURE OF INDEMNITORS In consideration of the execution by SURETY of the bond herein applied for, the Undersigned, jointly and severally, join in the foregoing Indemnity Agreement. Indemnitor #1 CARLOS EVANS Indemnitor #1, Spouse, if applicable Indemnitor #2, Spouse, Indemnitor #2 if applicable



QUOTE & ISSUE BOND TRANSACTION RECEIPT

BOND NUMBER	
32S577175	
AGENCY CODE	
58-0578	

PREPARER

NAME			PHONE NUMBER			
NORTHEAST AGENCIES	INC		(844) 448-6843			
ADDRESS	CITY	STATE	ZIP CODE			
6467 MAIN ST STE 104 WILLIAMSVILLE, NY 14221-5856						
ADDLICANT						

APPLICANT

NAME			PHONE NUMBER			
TOP NOTCH TOWING AT	(443) 597-7685					
ADDRESS	CITY	STATE	ZIP CODE			
2045 Hearndon Drive Annapolis, MD 21401						

APPLICANT BILLING ADDRESS

AL TEIGHT BILLING TO	JINEGO		
NAME			PHONE NUMBER
Carlos Evans			(443) 597-7685
ADDRESS	CITY	STATE	ZIP CODE
2045 Hearndon Drive Annapo	olis, MD 21401		

BOND

BOND					
DESCRIPTION OF BOND		BOND TYPE		CLASS CODE	
Police Towing		Contractors L	icense Bonds	909	
BOND AMOUNT	EFFECTIVE DATE		EXPIRATION DATE	TERM	
\$25,000.00	July 1, 2018		June 30, 2019	N/A	

OBLIGEE

ODEIGEE				
NAME				
CITY OF ANNAPOLIS				
ADDRESS	CITY	STATE	ZIP CODE	
160 Duke of Gloucester S	street Annapolis, MD 21401			

BONDING COMPANY

BONDING COMPANY NAME The Ohio Casualty Insurance Company

DOCUMENTS

BOND SIGNED BY	BOND DOCUMENTS COMPLETED BY	CREATION DATE
President signature graphic	MICHELLE WARREN	6/1/2018

PAYMENT INFORMATION*

TOTAL TERM PREMIUM	TAXES AND FEES	
\$249,00	\$0.00	
TOTAL AMOUNT DUE	PAYMENT METHOD	
\$249.00	Credit Card	

^{*} The credit card provided has been charged for this transaction and no additional fees are owed. Agent bond(s) changes are available through https://agents.libertymutualsurety.com

Liberty Mutual Surety Quote & Issue

350 E. 96th Street Indianapolis, IN 46240 (888) 844-2663 Fax: (866) 547-4883 Email: bonds@libertymutual.com

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

The Ohio Casualty Insurance Company

POWER OF ATTORNEY

Surety Bond Number: 32S577175 Principal: TOP NOTCH TOWING AND TRANSPORT LLC
Bond Amount: (\$25,000.00)Twenty-five Thousand Dollars And Zero Cents
KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, KERMIT ODOWELL
all in the city of FRUITLAND, state of MD each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.
N WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed hereto this 26th day of September , 2016
The Ohio Casualty Insurance Company 1919 By: David M. Carey, Assistant Secretary
STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY
On this 26th day of September , 2016 , before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.
N WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.
STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY In this 26th day of September 2016, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Dasualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer. NWITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written. COMMONWEALTH OF PENNSYLVANIA Notarial Seal Teresa Pastella, Notary Public Upper Merion Twp. Montgomery County My Commiscian Expires two Pastella, Notary Public Upper Merion Twp. Montgomery County My Commiscian Expires two Pastella, Notary Public Teresa Pastella, Notary Public Teresa Pastella, Notary Public Upper Merion Twp. Montgomery County My Commiscian Expires two Pastella, Notary Public Teresa Pastella, Notary Public Teresa Pastella, Notary Public Upper Merion Twp. Montgomery County My Commiscian Expires two Pastella, Notary Public Teresa Pastella, Notary Publi
This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full processing as follows:
ARTICLE IV – OFFICERS – Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and ubject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set orth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the resident and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by ne Board, the Chairman, the President or by the officer or officers granting such power or authority.
tertificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such tomeys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.
authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the company with the same force and effect as though manually affixed.
Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that the original power of attorney of which the foregoing is a ill, true and correct copy of the Power of Attorney executed by said Company, is in full force and effect and has not been revoked.
TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 1 day of JULY , 2019 .
1919 By: Kentilchely
Renee C. Llewellyn, Assistant Secretary



LICENSE OR PERMIT BOND		Bond 32S577175	
KNOW ALL BY THESE	PRESENTS, That we, TOP NOTCH	TOWING AND TRANSPORT LLC	
		as Principal, of	
2045 Hearndon Drive		,,	
<u>.</u>	(Street and Num	·	
Annapolis	, MARYLAND (State)	and the The Ohio Casualty Insurance Company	
(City)	, a New Hampshire	corporation, as Surety, are held and firmly	
bound unto CITY OF A			
***************************************		, as Obligee, in the sum of	
Twenty-five Thousand	Dollars And Zero Cents		
our heirs, executors, admi		which sum, well and truly to be paid, we bind ourselves, thy and severally, firmly by these presents.	
Sealed with our seals, and	dated this 1st day of July	, <u>2019</u> .	
	THIS OBLIGATION IS SUCH, That to do business as Police Towing	WHEREAS, the Principal has been or is about to be	
		by the Obligee.	
,	the Principal well and truly comply we this obligation to be void; otherwise t	rith applicable local ordinances, and conduct business in to remain in full force and effect.	
PROVIDED, HOWEVER	\:		
1. This bond shall continu	e in force:		
	y of June , <u>2020</u>	or until the date of expiration of any Continuation	
Certificate executed	by the Surety		
OR Until canceled as he	rein provided.		
2. This bond may be canc	eled by the Surety by the sending of no	otice in writing to the Obligee, stating when, not less than	
thirty days thereafter, li	ability hereunder shall terminate as to	subsequent acts or omissions of the Principal.	

TOP NOTCH TOWING AND TRANSPORT LLC

Principal

Ву

The Ohio Casualty Insurance Company

KERMIT DDOWELL Attorney in Fact



United States Surety Company 801 S. Figueroa Street, Suite 700 Los Angeles, CA 90017 main 800 486 6695 facsimile 310 645 9274

May 3, 2019

Notice of Cancellation

Certified Receipt No.

9214790439100109304107

Obligee:

CITY OF ANNAPOLIS DEPARTMENT OF CENTRAL SERVICES DEPARTMENT OF CENTRAL SERVICES, 93 MAIN STREET ANNAPOLIS, MD 21401

Principal:

KAI ENTERPRISES

DBA:

ANNAPOLIS JEWELRY AND LOAN

Bond No.:

1000859838

License No.:

Type of Bond: MISC CLASS BONDS

Bond Amount: \$3,000.00

In accordance with the cancellation provisions of this bond, United States Surety/Gompany hereby notifies you that it has elected to cancel said bond in its entirety./Such cancellation will become effective 30 days after receipt of this notice by you.

United States Surety Company

Celena/Santiago Attorney-in-fact

Reason for cancellation:

Agent's request Surety's request Other Non-renewal

\$225.00 needed in order to reinstate/renew bond. PLEASE MAKE CHECK PAYABLE TO: HCC Surety Group (Pls. disregard if payment has already been mailed.)



Producer:

INSUREON INSURANCE AGENCY 30 NORTH LA SALLE STREET SUITE 2500 CHICAGO, IL 60602

Principal:

KAI ENTERPRISES

DBA: ANNAPOLIS JEWELRY AND LOAN 1940 WEST STREET

ANNAPOLIS, MD 21401



Council

Office of the City Clerk 160 Duke of Gloucester Street Annapolis, MD 21401-2517

el 28/19 Russ

GityClerk@annapolis.gov • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Towing License Application

City Code Section 7.52,040

Applicant CARLOS EVANS					
Resident address 833-C/ifton Ave Arnold, Md. 21012					
Telephone day 443-597-7685					
Trading as Top Notch Towing And Transport LC.					
Business address 2045 Herindon Dr. Annapolis, Md. 21401					
Telephone, day 410-224-4808					
Storage location 2045 HEIN dow Dr. ANNAPOLTS, Md. 21401					
Vehicle License plate number Vehicle Identification Number (VIN)					
1 18900TT HTMNAALOGH 320854					
2 15048TT 1FDXF 46P36ED11292					
3 13670TT 5PVNJ8JN982550011					
4 10254TT 1HTSCAAM7YH311903					
5					
6					
7					
the state of the s					
I hereby certify under the penalties of perjury that:					
1. I am not directly or indirectly financially interested in any other towing license issued by the City of Annapolis;					
 I have reviewed and will charge the standard towing and storage fees approved by the City Council; and I have filed a Twenty-Five Thousand (\$25,000) bond with the Annapolis City Clerk to protect the owner of any 					
3. I have filed a Twenty-Five Thousand (\$25,000) bond with the Annapolis City Sterk to protest the Comer of any automobile from any property damage occurring while it is in my possession.					
Signature					
FOR GITY USE ONLY					
Dept. Sent Returned Approved Disapproved Signature					
Chief of Police 5/7/19 5/9/19					

Memo

DATE – May 3, 2019

To: Finance Office

From: Office of the City Clerk

RE: Counter Receipt - Top Notch Towing Check #

01052-435070 (miscot)	ABCB Fines	v
01022-442000 (L1)	ABCB License	
01022-442060 (amuse)	Amusement	
01022-442060 (amuse)	Arcade	
01022-442060 (amuse)	Circus/Carnival	
01041-431030 (Filife)	Closing Out Sale	
01022-442060 (amuse)	Distributors	
01041-431030 (ccffee)	Filing/Application Fees	
01022-442020 (othlic)	Fortune Tellers	
01022-442020 (othlic)	Massage Parlors	
01069-418060 (miscsa)	Non-taxable Sales (Copies, Settlements)	
01022-442020 (othlic)	Pawnbroker	
01022-442020 (huckst)	Peddler	
01021-441010 (scafe)	Sidewalk Cafes	
01022-442060 (amuse)	Theatres	
01022-442040 (towlic)	Towing Licenses \$	885.00
TOTAL(S)	\$	85.00



CITY OF ANNAPOLIS FINANCE DEPARTMENT FINANCE OFFICE, ROOM 103 160 DUKE OF GLOUCESTER ST ANNAPOLIS, MD 21401 410-263-7952

10207600-0008 KRISTI D. 05/03/2019 03:21PM

MISCELLANEOUS

TOWING LICENSE (TOWLIC) 2019 Item: TOWLIC 1 @ 85.00

TOWING LICENSE (TOWLIC) 85.00

85,00

Subtotal Total 85.00 85.00

CASH

85.00

Change due

0.00

Paid by: TOP NOTCH TOWING/CARLOS EVANS



Comments: TOP NOTCH TOWING/ TOWING

LICENSE

Thank you for your payment

CUSTOMER COPY DUPLICATE RECEIPT