

**TRAA TOWING AND RECOVERY ASSOCIATION OF AMERICA INC**  
**LEVEL 1 RECERTIFICATION APPLICATION**



**CERTIFICATION ID#:** \_\_\_\_\_  
**DATE YOU FIRST BECAME CERTIFIED:** \_\_\_\_\_

\_\_\_\_\_  
**NAME:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**HOME TELEPHONE:** ( ) \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_\_

**COMPANY NAME:** \_\_\_\_\_

**COMPANY ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE NUMBER:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_

**PAYMENT DUE: \$60.00 PAID BY:**      **Company**      **Self**

**METHOD OF PAYMENT (Please Check One)**

{ } Check made payable to TRAA

{ } Credit Card (Please Check One)

{ } VISA                      { } MASTER CARD                      { } AMERICAN EXPRESS

**Card #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Card Holder:** \_\_\_\_\_ **Cardholder Signature:** \_\_\_\_\_

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**MAIL THIS COMPLETED APPLICATION TO: TRAA, 2121 Eisenhower Avenue, Alexandria, VA 22314 or FAX to: (703) 684-6720.**

