



**CITY OF MISSION  
APPLICATION FOR WRECKER  
BUSINESS PERMIT**

1. BUSINESS NAME: SE-RO III Wrecker Service
2. BUSINESS ADDRESS: 921 N. Bentsen Palm Dr.
3. BUSINESS TELEPHONE NUMBER: (956) 929-9648 (956) 929-9648  
(DAY) (NIGHT)
4. OWNER'S NAME: Jose Angel Villarreal
5. OWNER'S ADDRESS: 921 N Bentsen Palm Dr.
6. OWNER'S DRIVERS LICENSE #: 11764070
7. List The Name, Address, Telephone Number And Driver's License Number For Each Wrecker Driver
  - a) Jose Angel Villarreal, 921 N. Bentsen Palm Dr, (956) 929-9648, 11704070 DL#
  - b) David Ruiz, 1812 W. 29th St, (956) 403-1032, DL# 45494154
  - c) \_\_\_\_\_
  - d) \_\_\_\_\_
  - e) \_\_\_\_\_
8. List each wrecker unit, giving license number, type of unit and description of equipment and date of expiration and number of State Inspection Sticker
  - a) unit #001, 101-006, light duty, 02/24
  - b) \_\_\_\_\_
  - c) \_\_\_\_\_
9. Type of Wrecker Service  Light Duty  Heavy Duty
10. Applicant must attach or furnish a copy of his insurance policy on said wreckers to comply with Wrecker Business Ordinance.
11. All wrecker permits shall be displayed visibly on each wrecker operated in the city

I, the undersigned, hereby make application for a wrecker business permit and request that: (Strike out inapplicable part)

- Be Placed On Wrecker Rotation List  
 Not to Be Placed On Wrecker Rotation List

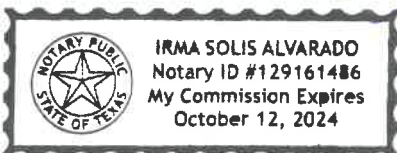
I Will Provide Wrecker Service On A Twenty-Four (24) Hour Basis, 7 Days A Week, As Required By Ordinance No. 1530

I swear or affirm that the foregoing information and statements are true and correct.

[Signature]  
Owner Signature

SWORN AND SUBSCRIBED BEFORE ME on this the 11 day of April, 2023.

(SEAL)



[Signature]  
Notary Public In and For the State of Texas

**ADDENDUM – WRECKER BUSINESS PERMIT**

I, the undersigned, swear that each wrecker driver employed by this company:

- 1) Has not been convicted, at any time of a felony offense; and
- 2) Is not on probation for any criminal offense above the grade of a Class "C" Misdemeanor, and;
- 3) Has not been convicted of a Class "A" Misdemeanor offense within the last twelve months, and;
- 4) Has not been convicted of a Class "B" Misdemeanor offense within the last six months; and
- 5) Has not been convicted of the offense of a driving while intoxicated or driving under the influence of drugs within the last 24 months, and;

I will provide updated notarized forms to the City Secretary whin three (3) days, listing personnel changes, providing personnel additions and deletions by the wrecker company and;

I understand that no permit authorizing the operation of a wrecker business and no permit authorizing the operation of a wrecker on the streets of the city shall be issued or re-issued, if wrecker company owner(s) and/or wrecker drivers are in violation of the above provisions. In addition, valid wrecker permits will be immediately revoked, if wrecker company owner(s) and/or wrecker drivers are found to be in violation of the above, and/or the wrecker company owner(s) fail(s) to notify the City Secretary of violations of the providions of the above section.

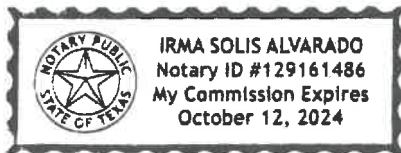
Signed on this the 11 day of April, 2023.

[Signature]  
Owner Signature

SWORN AND SUBSCRIBED BEFORE ME on this the 11 day of April, 2023.

(SEAL)

[Signature]  
Notary Public In and For the State of Texas



## TEXAS LIABILITY INSURANCE CARD

COMPANY PHONE NO. 405-594-4960  
COMPANY Trisura Insurance Company  
 COMMERCIAL  PERSONAL

POLICY NUMBER 149 TTS TX 100282-00  
EFFECTIVE DATE 08/21/2023  
EXPIRATION DATE 08/21/2024

YEAR 1999  
MAKE/MODEL Freightliner FLC120  
VEHICLE IDENTIFICATION NUMBER 1FUYSSEB1XPA85897

AGENCY A&B Risk Managers, LLC  
PO Box 11236  
Fayetteville AR 72703  
AGENCY PHONE NO. 800-518-1839

INSURED  
Jose A. Villarreal Jr. DBA Angel's Heavy Equipment Wrecker Service (& SE-RO III Wrecker  
921 N. Bentsen Palm Dr.  
Palmview TX 78573-0062

This policy provides at least the minimum amounts of liability insurance required by the Texas Motor Vehicle Safety Responsibility Act for the specified vehicle and named insureds and may provide coverage for other persons and other vehicles as provided by the insurance policy.

**SPANISH TRANSLATION**

**TRADUCCION DE ESPANOL**

## TEXAS LIABILITY INSURANCE CARD

COMPANY PHONE NO.      COMPANY       COMMERCIAL       PERSONAL

405-594-4960      Trisura Insurance Company

POLICY NUMBER      EFFECTIVE DATE      EXPIRATION DATE  
149 TTS TX 100282-00      08/21/2023      08/21/2024

YEAR      MAKE/MODEL      VEHICLE IDENTIFICATION NUMBER  
2000      Chevrolet      C6500      1GBJ6H1CXYJ516113

AGENCY      AGENCY PHONE NO.  
A&B Risk Managers, LLC      800-518-1839

PO Box 11236  
Fayetteville      AR 72703

INSURED  
Jose A. Villarreal Jr. DBA Angel's Heavy Equipment Wrecker Service (& SE-RO III Wrecker  
921 N. Bentsen Palm Dr.

Palmview      TX 78573-0062

This policy provides at least the minimum amounts of liability insurance required by the Texas Motor Vehicle Safety Responsibility Act for the specified vehicle and named insureds and may provide coverage for other persons and other vehicles as provided by the insurance policy.

**SPANISH TRANSLATION**

**TRADUCCION DE ESPANOL**



**Cab Card for Certificate #: 006505931C**

SE-RO III WRECKER SERVICE  
JOSE VILLARREAL JR  
PO BOX 3654  
MISSION TX 78573-0062

SE-RO III WRECKER SERVICE  
JOSE VILLARREAL JR  
921 N BENTSEN PALM DR  
PALMVIEW TX 78574-5052

Seq #	Unit #	Make	Model YR	VIN	Expires
1	1227	FREIGHTLINER	1999	1FUYSSEB1XPA85897	11/30/2023
		Permit #: TDLR0006505931002IM	Purpose: Incident Management		Type: Heavy Duty
2	004	CHEVROLET	2000	1GBJ6H1CXYJ516113	11/30/2023
		Permit #: TDLR0006505931003IM	Purpose: Incident Management		Type: Heavy Duty

**(VOID IF ALTERED)**

This card signifies that the Tow Truck Company has fulfilled the registration requirements of Chapter 86 as of the date this cab card was issued. To receive the current status of registration or insurance coverage, please call TDLR Customer Service at 1-800-803-9202.

The original Cab Card must be retained in the Tow Truck Company principle place of business. A copy of the page that identifies (by highlighting) the vehicle being operated must be placed in the cab of the identified tow truck.



**TEXAS DEPARTMENT OF LICENSING AND REGULATION**

**VEHICLE STORAGE FACILITY LICENSE**

# 0650713VSF

SE-RO III WRECKER SERVICE  
SE-RO III WRECKER SERVICE  
PO BOX 3654  
MISSION TX 78573-0062

Be It Known That:

**SE-RO III WRECKER SERVICE**  
**SE-RO III WRECKER SERVICE**

Located at:

921 N BENTSEN PALM DR  
PALMVIEW TX 78574-5052

Has paid the required fee, satisfied the prerequisites for a license as a TEXAS VEHICLE STORAGE FACILITY under the Vehicle Storage Facility Act, and has agreed to comply with its provisions. The license is issued on April 3, 2023 and shall expire on April 15, 2024.

**This license is NON-TRANSFERABLE and NON-ASSIGNABLE**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/24/2023

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.

**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).

<b>PRODUCER</b> A&B Risk Managers, LLC PO Box 11236  Fayetteville AR 72703	<b>CONTACT NAME:</b> Nadia Quevedo <b>PHONE (A/C, No, Ext):</b> 800-518-1839 x905 <b>E-MAIL ADDRESS:</b> nadia@owingsis.com	<b>FAX (A/C, No):</b> 972-426-6984
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b>  Jose A. Villarreal Jr. DBA Angel's Heavy Equipment Wrecker Service DBA SE-FO III Wrecker Service P.O. Box 3654 Mission TX 78573-0062	<b>INSURER A:</b> Trisura Insurance Company	<b>NAIC #</b> 22225
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:****REVISION 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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			149 TTSTX 100282-00	8/21/2023	8/21/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			149 TTSTX 100282-00	8/21/2023	8/21/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	On-Hook / Cargo			149 TTSTX 100282-00	8/21/2023	8/21/2024	Limit: \$100,000 w/\$1,000 Ded
A	Garagekeepers' Legal Liability			149 TTSTX 100282-00	8/21/2023	8/21/2024	Limit: \$120,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lot at 921 N. Bentsen Palm Dr. - Palmview, TX

**CERTIFICATE HOLDER****CANCELLATION**

PROOF OF INSURANCE  
 Proof of Insurance Coverage

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Leslie Thiele*

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Texas

COMMERCIAL  
DRIVER LICENSE

TX



11704870      Class A  
10/11/2018      Exp 10/10/2023  
DOB 10/10/1971

VILLARREAL  
JOSE ANGEL JR

921 N BENTSEN PALM DR  
PALMVIEW TX 75142000

Restrictions NONE      Exp NONE

Hgt 5'-07"      Sex M      Eyes BRO

ID 07312231105131378124

*Jose Villarreal*

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STATE OF TEXAS

VILLARREAL A JOSE JR

TOWING OPERATOR  
INCIDENT MANAGEMENT



TEXAS DEPARTMENT OF  
LICENSING & REGULATION

LICENSE NUMBER 20198  
EXPIRES 02/21/2021

TEXAS DEPARTMENT OF LICENSING & REGULATION

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