

Benevolent Fund Application Form

Required submission materials:

Application

First Name:

- Letter of Request (see instructions in Part IV)
- Proof of Applicant's Valid ID (copy of driver's license)

Submission instructions: Please complete all required boxes of the application form. You may submit your application and letter of request via mail or email. Please choose only one of these methods and do not submit multiple copies.

Mail: Complete and return your application and letter of request – Professional Towing Association of Ontario, 13775 Hwy 17 East, Thessalon, ON POR-1L0

Email: You can submit the application and letter of request via email - you can scan your application, with the required signature, and email it to: info@ptao.org

PART I – Applicant Information

Last Name:		
Physical Address:		
Mailing Address (If Different):		
Phone Number:	Cell Number:	
Email:		
PTAO Member: □ Yes □ No		
PART II – Beneficiary Information (If applicable)		
First Name:		
Last Name:		
Physical Address:		
Mailing Address (If Different):		
Phone Number:	Cell Number:	
Email:		
Relation to Applicant:		

Engage Evolve Elevate



PART III – Employer Information

Company Name:		
Contact Person:		
Physical Address:		
Mailing Address (If Different):		
Phone Number:	Cell Number:	
Email:		
PTAO Member: □ Yes □ No		
PART IV – Letter of Request		
In order to complete the application process	s, applicants must submit a letter of request explaining the follow	wing:
 Description of incident/situation including Explanation of financial need Use of funds (if approved) 	g dates and locations	
understand that any award is discretionary, a Should an award be made to me from the Pr to use the funds for the purposes as outlined	I Towing Association is confidential, and that its decision is final. and that meeting the eligibility criteria does not guarantee an arrofessional Towing Association of Ontario Benevolent Fund, I hed in this application and accompanying letter of request, I also association to list and publish the donation to me and my family a	ward. reby agree gree in
use the information for the intended purpose	is strictly voluntary. By doing so, you are giving the PTAO your pe. If you do not want to give the PTAO permission to use your injiding certain information may result in the PTAO 's inability to pr	formation,
Applicant Signature:	Date:	