

VEHICLE RELEASE FORM

Del's Auto Repair, Towing and Recovery

I _____, Owner of Vehicle described below:

YEAR: _____

MAKE: _____

MODEL: _____

VIN #: _____

Give _____ Authorization with proper identification to pick up my above mentioned vehicle and its contents.

If giving Insurance company authorization to pick up vehicle, I am also authorizing Insurance company's authorized agents.

Printed:

Signature:

Date:

Waiver: I agree to indemnify, hold harmless, and protect the above named agency, its employees, affiliate companies, and its agents from any claim, suit, or action brought against it by myself or a third party acting on my behalf for damages or other liability sustained or arising from the completion of the towing, recovery, storage, and vehicle release process.