



Vehicle Release Form

I, _____, am the legal owner of the below listed motor vehicle presently stored by **Southside Towing**, and thus authorize the personnel of said company to release said vehicle to the following person(s) and/or insurance company, and/or agent thereof:

Authorized Person or Insurance Company

NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____

ZIP CODE: _____ PHONE: _____

CLAIM #: (if applicable) _____

MOTOR VEHICLE INFORMATION:

YEAR: _____ MAKE: _____ MODEL: _____

COLOR: _____ VIN #: _____

OWNER INFORMATION:

NAME: _____ DRIV LIC #: _____

ADDRESS: _____ CITY: _____ STATE: _____

ZIP CODE: _____ PHONE: _____

Vehicle Owner's Signature: _____ Date: _____

Attach Copy of Drivers License Here

A copy of your drivers license MUST accompany this form.