



PROPERTY RELEASE FORM

Owner Name:		Vehicle Year:	
Address:		Vehicle Make:	
City State Zip:		Vehicle Model:	
Phone #:		License Plate #:	
Additional Owner:		VIN #:	
Brief Description of Items Removed:			
(Initials)	All personal belongings and license plates associated with the vehicle have been removed		
(Initials)	I authorize A-C-E 24 Hour Towing, and/or its affiliates, to coordinate release of my vehicle to a 3 rd party for pickup, insurance company, body shop or repair facility		
(Initials)	I DO NOT authorize any third party pickup of my vehicle at this time.		
I hereby acknowledge that the above information is true and correct and that items shown were removed by me on the date shown below from the vehicle listed above.			
Owner Signature:		Date:	

INVOICE/CALL #: _____