

24/7 Towing
340 E95th ct
Anchorage, AK, 99515
907 444 5555

Vehicle Release Form

I, _____ (_____) - _____
(Name) (Phone)

am the legal registered owner of the below listed vehicle presently stored on the property of **24/7 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 and/or Insurance Company)

VEHICLE INFORMATION:

(Year) (Make) (Model)

(License Plate) (VIN or LAST 6 of the VIN)

*I acknowledge that by doing so, I release **24/7 Towing** from any and all liabilities, seen and unforeseen from this moment forth.*

(Signature) (Date) / /