VEHICLE RELEASE AUTHORIZATION

To Whom It May Concern,	
I, [Owner's Full Name], am the re	gistered owner of the
following vehicle:	
Vehicle Type:	
Vehicle Model:	
Vehicle Color:	
Vehicle Identification Number (VIN):	
I am writing to authorize the Authorized Person or Insurance Compa	ny's Authorized Agent
to retrieve my vehicle from your yard/facility on my behalf. Below are th	ne contact details of the
authorized person:	
Authorized Person's Contact Information:	
Authorized Person Name:	
Authorized Person Phone Number:	
Authorized Person Email Address:	
I consent to the release of my vehicle to the aforementioned individual	and understand that
they will be required to present a valid photo ID at the time of retrieval.	
Owner's Contact Information:	
Owner's Phone Number:	
Owner's Email Address:	
By signing this letter, I confirm that I am the rightful owner of the vehicle	e and that I have
granted permission for the release of my vehicle to the above-named in	ndividual.
Sincerely,	
Owner's Signature Date	

NOTARIZATION F.S. 117.05 (13)(B)

State of	County of		
	-		
The foregoing instr	ument was acknowledged b	pefore me by means of \square physical pre	sence or \square
online notarization,	this day of	, 20, by	
	(name of per	son acknowledging).	
(Signature of Notary Publ			
,			
	mmissioned Name of Notary Public)		
□ Personally Known	-OR- □ Produced Identifica	ation	
-			
Type of Identification	on Produced		