

WESTWAY TOWING, INC.

3681 West Oakland Park Blvd. Ft. Lauderdale, FL 33311 Phone: 954.731.1115 Fax: 954.583.9347

FAX COVER

FROM	:	
FAX	:	PAGES:
YEAR	: MAKE :	MODEL :
VIN#	:	
POLICE AGENCY	:	

Please fill out the attached released form in its entirety. The form must be notarized. You may fax a copy along with photocopies of:

- 1. Valid registration
- 2. Insurance card (with claim# and agent contact info)
- 3. Owners valid State or United States Goverment issued picture I.D.
- 4. Include info to authorize a representative to have access to vehicle and/or personal property.
- 5. Form filled information must be legible and in English as unreadable forms will be subject to rejection.

To: 954.583.9347

In order to complete the release procedure, the original notarized form MUST ALSO BE MAILED to:

Westway Towing Attn: 3681 West Oakland Park Blvd. Ft. Lauderdale, FL 33311

If using Fed-Ex or UPS, we will need the paid receipt which will include the tracking number.

As soon as we receive faxed copy of the notarized form, we can begin making arrangements for release of vehicle and/or property.



WESTWAY TOWING, INC.

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CUSTOMER RECEIPT FOR RELEASE OF WESTWAY TOWING, INC. FROM LIABILITY FOR HARM TO PERSON OR PROPERTY NOT NOTED AT TIME OF RECEIPT

ADDRESS	:					
CITY	:		STATE:		ZIP:	
PHONE	: (HOME)	(MOBILE) _		(OFFICE)		
VIN	:					
YEAR	: MAK	E:	MODEL:			
D.L. NO	:		TITLE NO	:		
owner, lessee I further repr	e, or agent of the own	ner or lessee, I am d Westway Towing	entitled to im	of \$	ossession of:	nal and civil sanction, that as
I further repr	covery, towing, and seesent that I have the no loss or damage	oroughly inspecte	d this vehicle	and its co		sonable opportunity to do so f the following:
						ntarily waived my entitlemen and I agree to be bound this
	onsideration for rece em from any and all					and hold them harmless and specificity above.
Inc. from all my vehicle re responsible fo	claims regarding my emains at Westway T	personal property owing, Inc. to be led and a lien will be	y excepts as n handled by a t be placed me a	oted above hird party, s pursuant	. My signature bel and the vehicle is to FS 713.78 for th	ve releasing Westway Towing ow also acknowledges that i not picked up, I will be solely nose said charges. I have read
Owner/Lessee	e Signature:				Date Release	ed:
Agent of Owner/Insurance Co Printed:					Insurance Co	o. Phone #:
					Claim #:	
Insurance Co.	. (2 nd party)					o. Phone #:
					Claim #:	
Sworn and su	ıbscribed before me	his day of	_20and use	ed	for identific	ation
Notary Public		Se	eal		Notary	
			OFFICE USE OI	NLY RELEA	ASED BY:	