

Repossession Application

General Company Information						
Owner's Name:						
Company Name:						
DBA(s):			LLC Corporation			
Email:		Phone Number:				
Mailing Address:						
Physical Location:						
Requested Effective Date:						
FEIN/SSN:	DOT#:	MC#: _				
Description of Operations						
Estimated Gross Annual Income:		Estimated Payroll:				
Estimated Number of Involuntary Repos:						
, ,						
Estimated Number of Voluntary Repos:						
Estimated Number of Drive Aways:						



Garaging Location Information						
1. Address:						
	Fence (Y/N):		Cameras (Y/N):			
2. Address:						
Sq Ft of Lot:	Fence (Y/N):	Lighting (Y/N):	Cameras (Y/N):			
3. Address:						
Sq Ft of Lot:	Fence (Y/N):	Lighting (Y/N):	Cameras (Y/N):			
4. Address:						
Sq Ft of Lot:	Fence (Y/N):	_ Lighting (Y/N):	Cameras (Y/N):			
5. Address:						
Sq Ft of Lot:	Fence (Y/N):	Lighting (Y/N):	Cameras (Y/N):			
6. Address: _						
Sq Ft of Lot:	Fence (Y/N):	Lighting (Y/N):	Cameras (Y/N):			

Please provide photos of your location(s) showing fencing, lighting, cameras, storage area*



Employee Information 1. Name: Date of Birth: Licenses Number: State: Hire Date: Years Experience: Position (Owner, Repo Agent, Lot Driver, Camera Car, Office): Date of Birth: 2. Name: Licenses Number: State: Hire Date: Years Experience: Position (Owner, Repo Agent, Lot Driver, Camera Car, Office): **3.** Name: Date of Birth: Licenses Number: State: Hire Date: Years Experience: Position (Owner, Repo Agent, Lot Driver, Camera Car, Office): Date of Birth: **4.** Name: Licenses Number: State: Hire Date: Years Experience: Position (Owner, Repo Agent, Lot Driver, Camera Car, Office): 5. Name: _____ Date of Birth: _____ Licenses Number: State: Hire Date: Years Experience: Position (Owner, Repo Agent, Lot Driver, Camera Car, Office): **6.** Name: _____ Date of Birth: _____ State: Hire Date: Years Experience: Licenses Number: Position (Owner, Repo Agent, Lot Driver, Camera Car, Office): 7. Name: Date of Birth: Licenses Number: State: Hire Date: Years Experience:

Website: https://repo-insurance.com

Position (Owner, Repo Agent, Lot Driver, Camera Car, Office):



Vehicle Information					
1. VIN#:		Year:			
Make/Model:					
Wrecker Rollback Pick Up					
VIN#:		Year:			
Make/Model:	GVW:	Value:			
Wrecker Rollback Pick Up	Camera Car Tra	nsport Tag Registration Plate			
2 . VIN#:		Year:			
Make/Model:	GVW:	Value:			
Wrecker Rollback Pick Up	Camera Car Tra	nsport Tag Registration Plate			
3. VIN#:		Year:			
Make/Model:	GVW:	Value:			
Wrecker Rollback Pick Up	Camera Car Tra	nsport Tag Registration Plate			
4 . VIN#:		Year:			
Make/Model:	GVW:	Value:			
Wrecker Rollback Pick Up	Camera Car Tra	nnsport Tag Registration Plate			
5. VIN#:		Year:			
Make/Model:	GVW:	Value:			
Wrecker Rollback Pick Up	Camera Car Tra	nsport Tag Registration Plate			

Please provide a copy of your registration(s) if applicable*



Additional Information

Office Phone: 805-338-7991