## **Hold Harmless Agreement**

Buffalo Auto Recovery Service LLC 76 Roberts Ave.		Date: Acct#: Assignment Type:		
				Buffalo, NY 14206 <b>Phone:</b> 716-827-1116 <b>Fax:</b> 716-608-1535
State License No. 7101350 TR	S			_
Client/Lien Holder				
Address:				
City:		State:	Zip:	
Phone:			Fax:	
Assigned By:		Extension:		
Debtor				
Address:				
City:		State:	Zip:	
Phone:	Cell / Pager	:		
Work:			Phone:	
City:		State:	Zip:	
ADDITIONAL INFO				
VEHICLE INFORMATION				
Year: Make	<b>2</b> :	Model:		
VIN:			Color:	
Key Code 1:		Key Code 2	2:	
PAYMENT INFORMATION				
Monthly Payment:	Delinquent Since	:	Balance on Account:	
indemnify and hold you har arising out of our efforts to o	mless from and against any collect or repossess the above	and all claims, ⁄e claim, excep	the above described assignment. We agree to damage, losses and action resulting from or ot, however, such as may be caused or arisen employees, or the officers or employees of	
Authorized By [ Please Print	: ]:			
Sign	ature		Date	