



Towing LLC

Release of Vehicle to Someone Other than Registered Owner

Date: _____ Time: _____ Invoice# _____

Year: _____

Make: _____

Model: _____

Color: _____

License: _____ State: _____

VIN: _____

Owner Name: _____

Address: _____

City, State Zip: _____

Drivers License# (copy required): _____

Authorized Representative Name: _____

Address: _____

City, State Zip: _____

Drivers License# (copy required): _____

Personal Items Release: Yes No

Vehicle Release: Yes No

I agree that I am the registered owner or an authorized legal representative of the registered owner.

Signature of Owner/Authorized Representative

14001 Hwy 90
Boutte LA 70039
985-785-4444

5901 Hwy 90
Avondale LA 70094
504-437-0000

www.jakestowing.com