8505 TULANE ROAD SOUTHAVEN MS 38671

24/7 HOTLINE: 662-393-(TOWS)8697



HOLD HARMLESS FORM

This is to certify that I ______ am the Registered Owner/Titleholder/LienHolder of the Vehicle listed below which is presently stored at one of Choice Towing, LLC locations.

VIN NUMBER: _____

YEAR:_____

MODEL:_____

TAG NUMBER:_____

This letter is authorization to release the above described vehicle and its contents to:

Whose current address is	whom I appoint as my
agent.	

I understand that by authorizing the release of this vehicle and its contents to the above named individual, I thereby relieve Choice Towing, LLC and its agents, officers, and employees from the responsibility and liability for any and all claims, actions, demands, and damages, that might arise as a result of the release of this vehicle and its contents to the above named individual.

www.choice-towing.com