



Authorization for an Individual Person to Release a Vehicle to an Insurance Company

This form **cannot** be used if the owner of the vehicle is a Business or Company. Please **complete** form, get notarized (*make sure exp date of notary is imprinted in seal or send notary certificate*), notary seal **MUST** be legible (*may need ink notary seal if faxing document is needed*), and fax back to 770-935-9651 & call 770-381-1140 to confirm fax or bring original to the office. **IMPORTANT:** Any alteration, strike-over or correction voids this form. This form must be printed and legible and is valid only when completed-in-full and signed by a Notary Public.

I give Statewide Wrecker Service Inc. permission to release my vehicle to the insurance company listed below. My vehicle is currently located at Statewide Wrecker Service, Inc. at 2775 Simpson Circle in Norcross, GA 30071 -OR- 263 Luxomni Road in Lilburn, GA 30047 -OR- 3156 Buford Highway in Buford, GA 30518 -OR- 2315 Murphy Boulevard in Gainesville, GA 30504.

Owner's Printed Name as it appears on Valid Ownership Documents: _____
Owner's Telephone Number: _____ Email: _____
Year, Make, Model: _____
Full VIN: _____
Insurance Company Name: _____
Contact Person @ Insurance Company: _____ Phone # _____
Insurance Claim Number: _____

Owner's Signature: _____ Date: _____

** Notary Public Needs to Complete the Below Section **

State of _____
County of _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____
DAY OF _____, 20_____
BY _____.
(name of signer – owner's printed name)

____ Personally Known
-- OR --
____ Produced Identification
Type and # of ID _____

(Notary Public Signature)

(Name of Notary -Typed, Stamped, or Printed - & Seal)

