

John Eagle Collision Center

Vehicle Release Form

I hereby authorize the release of the below listed vehicle to the Insurance Company assigned to its repair or their representative, to take possession of the vehicle, the keys and contents. My signature also releases John Eagle Collision Center from any liability for the vehicle or its contents. My signature further confirms that I have removed all personal possessions from the vehicle.

Vehicle Information:

Make: _____ Model: _____ Year: _____
License# _____ VIN# _____

Signature _____

Date _____

Printed Name _____

(Please print, sign and FAX this completed form to (214) 353-3574)

For John Eagle Collision Center Use Only:

Insurance Company Assigned: _____

Estimator: _____ RO# _____

Towing Company: _____