

ROGERS TOWING & RECOVERY SERVICE, INC.
P.O. BOX 1094, 800-908 S. US 1, BUNNELL, FL. 32110
386.437.3039 FAX 386.437.7211

RELEASE FORM

I HEREBY RELEASE ROGERS TOWING AND RECOVERY SERVICE, INC. FROM LIABILITY FOR ANY OCCURRENCE OF DAMAGE OR INJURY TO MY PERSON OR PROPERTY WHILE ON THESE PREMISES. THE SOLE PURPOSE OF MY ENTRY IS TO RETRIEVE PERSONAL BELONGINGS CONTAINED IN MY DAMAGED VEHICLE HELD ON THESE PREMISES ON BEHALF OF MYSELF AND MY INSURANCE COMPANY.

OWNERS NAME _____

ADDRESS _____

CITY, STATE, ZIP CODE _____

PHONE # _____

VEHICLE YEAR, MAKE, MODEL _____

LIEN HOLDER _____

YOUR INSURANCE COMPANY _____

DO YOU HAVE COLLISION COVERAGE? YES OR NO

VEHICLE RELEASED TO _____

SIGNED _____

DATE _____

ADDITIONAL INFO _____