

AUTHORIZATION FORM RELEASE TO APPROVED PARTIES

This completed form must be provided by the Buyer to their Transporter if the Buyer will not be present at the properties removal. Buyer must also provide a copy of the Property Release document to the Transporter. Removal is by appointment only.

Date:						
Lot #:						
Catalog Description (Non-Ve	hicle):					
Storage Location"	.merey.				_	
Vehicles Only Below:					_	
Year & Make:						
Model:						
VIN #:						
I,lot #'s purchased through the the referenced assets from the	· ·			yer of the abo		
First Name:						
Last Name:						
Company:						
Valid Driver's License						
Number / State						
Buyer's Signature:						
Buyer's Phone Number:						
Please	attach photo cop	y of buyer's	driver's licens	e below:		