

PAST & PRESENT TOWING & RECOVERY, INC.
ADDITIONAL IMPOUND INFORMATION

Registered Owner's Name: _____

Telephone Number: _____
(Please provide the best number to reach you)

Insurance Company _____

Telephone Number: _____

Claim Number: _____

Do you have full coverage? _____ YES _____ NO

Were you at fault? _____ YES _____ NO

Is the insurance company picking up your vehicle? _____ YES _____ NO

If not, who should we release your vehicle to? _____

I authorize Past & Present Towing & Recovery, Inc. to release my vehicle to either my insurance company (or their representatives) or to the company/person stated above.

Registered owner's signature: _____

Date: _____