

## Absentee Authorization to Release and Hold Harmless Agreement

Instructions: This form must be completed in full and notarized. Email the completed form, along with a copy of your identification and proof of ownership, to Shaunstowing@gmail.com. If you have questions, call (970) 925-2750.

I		(vehicle owner	rs name) ai	uthorize Shaun's Towinุ	g & Recovery 82
	ne, Basalt, CO 81621, to re				
Year:	Make:	Model:	Vir	າ:	
Only to th	e following person: (The na	ame of person to pio	ck up the v	ehicle, NOT your name)	ı:
Full Legal	Name on the State Issues I	D:			
to hold ha	nat I am the legal registered rmless Shaun's Towing & F In's Towing & Recovery foll	Recovery, its employ	ees and of		
Signed thi	s day of	, 20			
Full Legal	Signature			(Vehicle owner)	
Notary Pu	blic				
State of	, Count	y of			
Subscribe	d and sworn to before me	this da	ay of	, 20	
My comm	ission expires:				