

Last Chance Wrecker & Sales

REPOSSESSION & HOLD HARMLESS AUTHORIZATION

Office: 317-541-8551

24-HR Storage Facility #: 317-972-9651

Fax: 317-972-9651

Description Of collateral: Yr _____ Make _____ Model _____ Color _____

VIN # _____ License Plate # _____

Debtor/Lessee's Name: _____

Debtor's Social Security Number _____

Date: _____ Monthly Payment _____ Outstanding Balance: _____

This is your authorization to repossess, impound and transport the above described collateral which is covered by a defaulted installment contract or lease agreement. We authorize Last Chance Wrecker & Sales as our exclusive agents for repossessing the above described collateral. This means that any agent we have previously engaged is no longer authorized to repossess this collateral unless they are subsequently authorized to do so by Last Chance Wrecker & Sales.

We agree to identify, defend, and save you harmless from and against any and all claims, losses and actions, except for your unauthorized efforts and/or actions which may be acts of our company, its officers, employees or agent. We understand that Last Chance Wrecker & Sales under its corporate charter, is bound by the laws of the State of Indiana, and its services are rendered subject to the jurisdiction of the laws of that state.

I understand this is a contingent repossession and I will not be charged unless the collateral is repossessed.

We also agree that if the debtor or his agent(s) should surrender the collateral to anyone else during the term of this agreement, it will be deemed to have been repossessed by Last Chance Wrecker & Sales. Your special immediate efforts will be appreciated.

Signature _____ Company _____

Contact Name _____

Address _____

Phone Number _____ Fax Number _____
