



**DEDICATED**  
**TRANSPORTATION SERVICES**

**714-530-TOWS (8697)**  
**FAX 714-530-8011**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Plate/Vin#: \_\_\_\_\_

I \_\_\_\_\_ Authorize DTS to release the vehicle described above to \_\_\_\_\_.

I certify that I am the registered owner of the vehicle described above.

Registered owner's signature: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Copy of identification/drivers license: