



Authorization For Release

Date _____

I, _____, authorize _____
(Registered Owner's Name) (Name of person obtaining release)

To obtain a release for my vehicle, a _____, _____, _____,
(Year) (Make) (Model)
_____, _____, from the Salem Police Department.
(Color) (License Plate)

I further authorize _____ to drive my vehicle.
(Must have a valid drivers license)

Signature of Registered Owner

Driver's License #

State of _____

County of _____

Signed or attested before me on ____ day of _____, 20__ by _____
(Registered Owner)

(Notary Public)

My commission expires: _____