BUSINESS VEHICLE RELEASE AUTHORIZATION FORM

Madison Police Department – Court Services 211 S. Carroll St, Rm GR10 Madison, WI 53703

Phone: 608-266-4170 | Fax: 608-267-1117 Email: PDCSTOW@cityofmadison.com

If your business is the owner of a vehicle that has been impounded, a person must be designated to retrieve the vehicle. All sections of this form must be fully completed, including the seal of a Notary Public authenticating the business representative's signature. To claim the vehicle, all tickets must be addressed at that time, and your designee must present this authorization form and a government-issued photo ID.

Business Representative Information		
Business Name:	Phone Number:	
Address:		
City: State:		
Representative Full Name:	Title:	
Please initial below:		
I am legally authorized to act on behalf of the business vehicle to the Designee.	named above to release the specified	
Designee Information		
Designee Full Name:Pr	nee Full Name:Phone Number:	
Address:	 _	
City: State:	Zip:	
Vehicle Information		
License Plate: VIN:		
Make / Model / Color:		
Notarized Signature	NOTARY PUBLIC SEAL	
On behalf of my company, I give permission for the designee to retrieve the vehicle described above. I swear and affirm that the information contained in this document is true and correct to the best of my knowledge. I understand that for any false statement made herein, I am subject to prosecution for false swearing under Wis. Stat. Sec 946.32, a Class H Felony.		
Signature	Signature	
Printed Name	Signature	
 Date	Printed Name	
	Date commission expires	