



TEXAS DEPARTMENT OF LICENSING AND REGULATION

COMPLIANCE DIVISION/Tow Truck/Vehicle Storage Program P.O. Box 12157 Austin TX 78711
Email: Towing@license.state.tx.us Website Address: www.license.state.tx.us Tel: 800-299-1700

NOTICE OF RIGHT OF POSSESSION FOR SALVAGE OR REPAIR

By execution of this Notice of Right of Possession for Salvage or Repair form, I certify that I am employed by

_____ towing company. I certify that I have been authorized by the insurance company listed herein to take possession of the motor vehicle listed below. I acknowledge that a representative of the insurance company stated herein certified to me that the insured or claimant authorized the removal of the vehicle and that said authorization is in the records are the insurance company.

This vehicle will be stored or repaired at _____ County, Texas (name of and street address of the salvage yard, auction company, or repair facility) until the insurance claim referenced herein has been settled.

Tow Operators Signature

Date

VEHICLE INFORMATION:

Vehicle Year, Make and Model	Year	Make	Model
Vehicle Identification Number			
State of Registration and License Plate #	State	Lic. Plate #	

VEHICLE OWNER/CLAIMANT INFORMATION:

Printed Name of Owner/Claimant	
Telephone Number	

TOWING OPERATOR INFORMATION:

Printed Name of Operator	
TDLR Operator License Number	

INSURANCE INFORMATION:

Printed Name of the Company			
Printed Name of the Certifying Agent			
Certifying Agent's Direct Telephone Number	()	Insurance Claim #	