

**ACTION  
AUTO  
RECOVERY**  
SINCE 1967

— Southern California Repossession & Skip Tracing Experts —

[www.RepoBiz.com](http://www.RepoBiz.com) / [action@repobiz.com](mailto:action@repobiz.com)

State License RA 1798

**Serving: Los Angeles and Orange Counties**

**Please Release Collateral back to our Customer**

From - Financial Institution Name: \_\_\_\_\_

Financial Institution Customer Name: \_\_\_\_\_

Vehicle Year, Make & Model: \_\_\_\_\_

Full VIN or last 8: \_\_\_\_\_ Account number: \_\_\_\_\_

Our customer listed above has taken care of their responsibilities and may redeem their vehicle from you. We have instructed them to call your transportation department at (800) 421-5528 so you may explain the redemption procedure and your business hours.

**Please collect on our behalf from our customer the following before releasing our collateral:**

\_\_\_\_ Your Recovery fee:

\_\_\_\_ Outstanding balance of: \_\_\_\_\_ by certified check payable to our company.

**Please fax us from our customer the following documents before releasing our collateral:**

\_\_\_\_ Copy of current DMV registration.

\_\_\_\_ Copy of current Insurance.

\_\_\_\_ Copy of our customers current valid Drivers Licenses.

\_\_\_\_ Other: \_\_\_\_\_

**Please bill us the following:**

\_\_\_\_ Your Recovery Fees.

\_\_\_\_ Our customers Vehicle Storage Fees.

\_\_\_\_ Our customers Personal Effects Storage Fees.

\_\_\_\_ Other: \_\_\_\_\_

**Please instruct our customer to pay the correct police department the \$15.00 repossession call in fee / filing fee, and make a copy of the receipt for your files.**

Thank you,

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Direct Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please sign & date above and fax to us at: (562) 989-1414**