



KEVIN RICHARDS, BAILIFF
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VEHICLE RECOVERY WARRANT

DATE: _____
 COMPANY NAME: _____ TEL: _____
 COLLECTOR: _____ ACCT. NO.: _____
 LESSEE / DEBTOR: _____
 ADDRESS.: _____
 CITY: _____ POSTAL CODE.: _____ TEL NO.: _____
 BIRTH DATE: _____ SIN: _____ DL#: _____
 DRIVER (IF DIFFERENT): _____
 ADDRESS: _____
 : _____
 CITY: _____ POSTAL CODE.: _____ TEL.NO.: _____
 EMPLOYMENT RECORD: _____

VEHICLE #1
 YEAR: _____ MAKE: _____ MODEL: _____
 SERIAL #: _____ LIC: _____ COL: _____
 KEYS AVAIL. (Y / N) : _____ KEY CODE : _____
 AGREEMENT / CHATTEL / CONTRACT
 DATE: _____
 ARREARS AMT: _____
 STORAGE: () OURS () OTHER _____
 PLATES: () REMOVE () LEAVE ON _____
 DROP LOCATION: _____
 COMMENTS: _____

We hereby agree to protect, reimburse, hold harmless and indemnify you against any and all losses, claims, damages and costs which may be made against you or suffered by you by reason of you acting under this direction, and to immediately reimburse you and indemnify you for any and all legal costs incurred by you in the defense of any claims for damages as aforesaid, and for services performed under this direction.

SIGNATURE: _____ PHONE # _____
 POSITION (TITLE) _____

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