

 City of Bellevue Police Department	VEHICLE RELEASE AUTHORIZATION	PD USE ONLY: ☐ Verified Veh. Reg. ☐ Verified RO Driver's Lic. ☐ Records Processed T# _____													
VEHICLE LICENSE PLATE	LIC. PLATE STATE	VEHICLE IDENTIFICATION NUMBER (VIN):													
VEHICLE MAKE	MODEL	COLOR	YEAR												
REGISTERED OWNER (R/O) LAST NAME	R/O FIRST NAME	R/O MIDDLE NAME	R/O D.O.B. (MM/DD/YYYY)												
REGISTERED OWNER DRIVER LICENSE NUMBER		LICENSE ISSUING STATE													
REGISTERED OWNER ADDRESS		REGISTERED OWNER PHONE													
AUTHORIZATION TO RELEASE VEHICLE TO OTHER AND RELEASE OF LIABILITY															
I, _____, registered owner of the above-described vehicle, hereby authorize the below-named person(s) and/or organization(s) to retrieve the above-described vehicle and vehicle keys on my behalf from the Bellevue Police Department, any law enforcement agency, or any towing company. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #f2f2f2;"> <th style="width: 40%; padding: 5px;">FULL LEGAL NAME OF PERSON/ORGANIZATION</th> <th style="width: 20%; padding: 5px;">DATE OF BIRTH (if individual) OR BUSINESS UBI # (if organization)</th> <th style="width: 40%; padding: 5px;">ADDRESS & PHONE NUMBER</th> </tr> </thead> <tbody> <tr><td style="height: 60px;"></td><td></td><td></td></tr> <tr><td style="height: 60px;"></td><td></td><td></td></tr> <tr><td style="height: 60px;"></td><td></td><td></td></tr> </tbody> </table> This authorization is valid if I am detained, hospitalized, unable to be present, or otherwise unable to retrieve my vehicle myself. I do not desire my vehicle to be impounded if it is recovered and am not immediately available to claim it. As such, I authorize the above-named person(s) and/or organization(s) to sign any documents required for the release of my vehicle; pay or arrange payment of any necessary fees; and physically retrieve and take possession of the vehicle and vehicle's keys from the Bellevue Police Department or tow company. I understand that by authorizing the above person(s)/organization(s), it does not guarantee that the Bellevue Police Department will not impound the vehicle or be able to notify the above-named authorized person/organization. I understand that regardless of this authorization, my vehicle may be impounded if it poses an immediate hazard, a safety hazard, is illegally parked, is subject to impound, or the authorized person/organization is unavailable or unreachable. This authorization is valid until the following date: _____. If no date is specified, this authorization will be treated as valid indefinitely until revoked in writing by an above-listed registered/legal owner of the vehicle or change of ownership.				FULL LEGAL NAME OF PERSON/ORGANIZATION	DATE OF BIRTH (if individual) OR BUSINESS UBI # (if organization)	ADDRESS & PHONE NUMBER									
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In consideration of being allowed to exercise the option of waiving impound of the vehicle described above and releasing to a third-party that is on file with the Bellevue Police Department, I hereby relieve and release the City of Bellevue, the Bellevue Police Department, its officers, its employees, and volunteers from any and all responsibility and liability for the vehicle, its contents, and from any and all claims, actions, demands, damages and loss which might arise as a result of releasing the vehicle and its contents to person(s) and organization(s) claiming to be the above-named authorized person(s)/organization(s) and/or leaving it parked where found as a result of my decision to waive impound of the described vehicle. I understand that if my vehicle is impounded, the City of Bellevue is not liable for any of the towing/impound costs or expenses. I understand I must contact the tow company to contest any impound fees.

By signing this Vehicle Release Authorization I acknowledge that I have carefully read and understand its contents and that I am waiving any right that I may have to bring a legal action or to assert a claim against the City of Bellevue, the Bellevue Police Department, and/or its elected officials, employees, volunteers, agents, or officers. I have read, understood, and voluntarily accept and agree to the terms of this Vehicle Release Authorization.

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct (if not signing with an officer, you must sign in front of a Notary Public).

Signed _____

_____ Date

Witness Verification is for Police Officer Use Only
If not signing with an officer, see Notarization requirement below.

_____ Badge #:

_____ Witnessed & Verified – Officer Name, Signature, and Badge Number

_____ Date

NOTARIZATION/CERTIFICATION – You do not need your signature notarized if you signed the form in front of a BPD Police Officer, who can certify your signature and verify identification. **You must include a copy of your Driver License and your Vehicle Registration if submitting the form without an officer.**

NOTARIZED CERTIFICATION

State of Washington

County of _____

I certify that I know or have satisfactory evidence that _____ (name of person) is the person who appeared before me, and said person acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated _____

Signature of Notary

Name of Notary

Title

(Seal or Stamp)

My appointment expires: _____



For alternate formats, interpreters, or reasonable modification requests please phone at least 48 hours in advance 425-452-6917 (voice) or email BPDRecords@bellevuewa.gov. For complaints regarding modifications, contact the City of Bellevue ADA, Title VI, and Equal Opportunity Officer at ADATitleVI@bellevuewa.gov. If you have any questions regarding the ADA statement above or need help, please reach out to ADA, Title VI, and Equal Opportunity Officer using the contact information to the right.