



TOWED VEHICLE CANCELATION

AGENCY: _____

OFFICER: _____

DATE OF REMOVAL: _____

TIME OF REMOVAL: _____

REASON FOR RELEASE: _____

LICENSE PLATE: _____ LICENSE STATE: _____

VIN: _____

REPORT #: _____

MISC INFORMATION:

CVD USE BEYOND THIS LINE

OCA#: _____

NIC#: _____

ENTERED INITIALS: _____

ENTERED DATE: _____

ENTERED TIME: _____