

## **CLEARANCE REQUEST**

Purpose of Clea	arance R	equest			
Was the vehicle booted?	Was the	Was the vehicle towed?		Is there a registration hold?	
Yes No	Yes	No	Yes	No	
Registered Own	er Infori	mation			
First Name		Middle Initial	Last Name		
Address					
City		State	ZIP Code		
Date of Birth	Phone		E-mail		
*Requestor's Name (	if different	from above)			
First Name		Middle Initial	Last Name		
Vehicle Informa	tion				
Plate # Y	ear	Make			
Date the vehicle was booted	, towed or regi	stration hold was p	olaced		
	F	OR OFFICE U	SE ONLY		
Received By		Date		Time	