



# AUTHORITY TO LIFT, CARRY OR TOW

Tow Truck Owner \_\_\_\_\_ Name or Owner  
of vehicle to be moved \_\_\_\_\_

Address \_\_\_\_\_ Address of Owner \_\_\_\_\_

Make of Vehicle \_\_\_\_\_ Rego No. \_\_\_\_\_

Place from which vehicle is to be moved \_\_\_\_\_

Place to which vehicle is to be moved \_\_\_\_\_

★ Being

★ Due absence of incapacity of } the owner, driver of person in charge of the described motor vehicle

## I AUTHORISE IT TO BE MOVED TO AND STORED AT THE STATED PLACE

(\*Cross out Inapplicable word)

Signature \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Address if not Owner \_\_\_\_\_

Capacity of Signatory if not Owner  
(eg driver, person in charge) \_\_\_\_\_

(NOTE : To be signed by the Owner, driver or person claiming to be in charge of the Vehicle, or  
in their absence or incapacity by a Police Officer who shall record his rank, number and Station )

Name of Driver of Tow Truck Driver \_\_\_\_\_

Reg. No. of Tow Truck \_\_\_\_\_ Driver's Certificate No \_\_\_\_\_

Name of Insurer (where applicable) \_\_\_\_\_

### FOR OFFICE USE ONLY

Towage \_\_\_\_\_

Salvage \_\_\_\_\_

Storage \_\_\_\_\_

Second Tow \_\_\_\_\_

Sundries \_\_\_\_\_

Total

Received the above sum

Per \_\_\_\_\_