

Right of Redemption and Opportunity for a Hearing Notice

You must use this form and include any required attachments if you want to redeem an impounded vehicle, access an impounded vehicle, or request a hearing about the vehicle.

When completed, file this form with the district/municipal court in the county where the vehicle was impounded.

As the person or business seeking to redeem an impounded vehicle, you are hereby notified that you have certain statutory rights and obligations as set forth in RCW 46.55.

- You have the right to request a hearing in district/municipal court to contest the validity of the impound and/or the towing and storage fees. Your request for a hearing must be received by the district/municipal court within 10 days of this date. Attached is a hearing request form.
- If you choose to request a hearing, all funds paid to redeem your vehicle will be held in a trust account pending the disposition of that hearing.
- You have the right to receive a copy of the towing and storage receipt. Attached is a copy of that receipt.
- You have the right to know the name of the person or agency authorizing the impound. This information is attached.

Vehicle information

License number	State	Vehicle Identification Number (VIN)	Make	Model	Year
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Person or business seeking to redeem the vehicle

Name		
Street address		
City	State	ZIP code
(Area code) Telephone number		
Acknowledgment <i>As the person, vehicle insurer or a vendor working on behalf of the vehicle insurer seeking to redeem an impounded vehicle, I acknowledge receipt of this written notice of rights in redeeming the vehicle. I understand that I have the right to request a hearing in district/municipal court and have received a form to make such a request. I have received a copy of the towing and storage receipt, the name of the person or agency authorizing the impound, and I acknowledge that this Right of Redemption and Opportunity for a Hearing form will serve as a receipt for the vehicle.</i>		
<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	X	Date and time Signature

Person or business seeking access to the vehicle or vehicle information

If you are seeking to retrieve personal belongings from the vehicle, view the vehicle to determine the extent of damage, or request any information in regards to the vehicle, please complete this section.

Purpose <input type="checkbox"/> Retrieve personal belongings <input type="checkbox"/> View the vehicle <input type="checkbox"/> Request information on the vehicle		
Name		
Street address		
City	State	ZIP code
(Area code) Telephone number		
Acknowledgment <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		
Date and time	X	Signature