

## Non-Registered Owner Redemption Claim for Motorcycles or Mopeds

Complete this form to redeem an impounded motorcycle or moped from a registered tow truck operator on behalf of an owner who is hospitalized due to an accident involving the vehicle.

As the person representing the injured party and seeking to redeem the impounded vehicle, you are required to:

- Indicate your relationship to the injured person.
- Pay all costs of towing, storage, or other services.
- Provide a valid government-issued photo ID.

License number	State	Vehicle Identification N	Number (VIN)	Make	Model	Year
erson or bu	siness	seeking to red	eem the vehicl	e		
Your relationship to	the injured	person:				
<b>·</b>	Friend	☐ Spouse/Partne	er 🗌 Other			
Your name						
Street address						
City				State ZIP code		
				State		
(Area code) Phone number			Email address	,		
Name of injured person			Name and location of hospital			
Physical address w	here motoro	ycle/moped will be stored	<u> </u>			
		,				
City				State	ZIP code	
\cknowledg	ment					
Do you:						
				cycle is delivered ar		
		•				
				I to you?		Yes 🗆
•		•	the registered ow			1 <b>V</b>
						∫ Yes ⊔
				om the Registered T		Yes □
•	•			to the registered ow		100 🗀
						Yes □
Understand tha	at the Re	gistered Tow Truck	c Operator may refu	use this redemption		
request for god	od cause	?				Yes 🗆
declare under	penalty (	of perjury under th	e law of Washingto	on that the foregoing	g is true and corre	ect.
			v	redeeming the motorcycle/		
			^			

the impound and/or the towing and storage fees. Your request for a hearing must be received by the district/

RCW 46.55.120, 130, 150

municipal court within 10 days of this date.