

NORTHERN ARIZONA UNIVERSITY POLICE DEPARTMENT

IMPOUNDED VEHICLE APPLICATION FOR RELEASE & HEARING REQUEST

REQUESTOR NAME:				REQUESTOR ADDRESS:				
TELEPHONE #:		FAX#:		E-MAIL A	ADDRESS:			
МАКЕ	MODEL	LICENSE PLAT		LICENSE STATE	VEHICLE IDENTIFICATION NUMBER (VIN)			
DOCUMENTS REQ	UIRED FOR ALL R	ELEASES						
□Proof of valid drivers' license for the vehicle's registered owner or their spouse								
□Proof of valid vehicle registration (attach copy)								
□Proof of valid vehicle insurance (attach copy)								
□If required, proof of ignition interlock installation (attach copy)								
REQUEST FOR EAR	REQUEST FOR EARLY RELEASE							
□ I am the vehicle's registered owner, my drivers' license has been reinstated AND I was ONLY charged with driving on a suspended license								
I am the registered owner or registered owner's spouse AND I was not the driver at the time of the impoundmen (Complete Notarized Agreement to Release Impounded Vehicle on reverse side)								
□ The vehicle was st				Investigating Agency / Report #:				
I I represent a motor vehicle dealer, bank, credit union, acceptance corporation, or other financial institution licensed to operate in the State of Arizona which has a possessory interest in the vehicle (attach repossession documents)								
I represent a vehic (attach proof of re		nd the vehicle w	as rente	d to the driver a	at the time of impoundment			
🗆 l represent a parki					o which the vehicle was subject to bailment ent			
If none of these circumstances apply, your vehicle IS NOT eligible for early release. The vehicle will only be eligible for release 30 days after the date of impoundment.								
THIRD PARTY DES	IGNEE							
If you wish to allow the vehicle to be released to a person other than yourself, you must submit a signed, notarized letter naming an authorized driver. Evidence of Power of Attorney will also be accepted. The person named as your designee MAY NOT be the person who was driving the vehicle at the time of the impoundment.								
REQUEST FOR HEARING								
I am the vehicle's registered owner and I believe my vehicle was unlawfully towed. I therefore request a hearing to consider the facts leading to the impoundment of my vehicle. I request this hearing be conducted:								
		•	For NAU		e Only:			
			ate Received:	/ Hearing Date:				
INSTRUCTIONS FOR SUBMITTING THIS APPLICATION Submit your application using the following:								
1. By fax to (928) 523-9483 or;								
 By e-mail to <u>naupd-dispatch@nau.edu</u> with "DR#xx-xxxxx Impound Release Request" in the subject line or; 								
3. By mail to PO Box 5602 Flagstaff, AZ 86011 or;								
4. In person a Reviewing Officer:	4. In person at the Northern Arizona University Police Department, 550 E. Pine Knoll, Building 98A Reviewing Officer: □ Early Release Approved							
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			-	ring Requeste				



NORTHERN ARIZONA UNIVERSITY POLICE DEPARTMENT

AGREEMENT FOR RELEASE OF IMPOUNDED VEHICLE

			REP	ORT NUMBER
VEHICLE OWNER(S):				
ΜΑΚΕ	MODEL	LICENSE STATE		B (VINI)

I, the undersigned, agree to not allow any person to drive my vehicle under any of the following conditions:

- 1. A person whose driving privilege is suspended or revoked for any reason.
- 2. A person who has not ever been issued a valid driver license or permit by this state and the person does not produce evidence of ever having a valid driver license or permit issued by another jurisdiction.
- 3. A person who is subject to an ignition interlock device requirement pursuant to chapter 4 of Title 28 (DUI) and the person is operating a vehicle without a functioning certified ignition interlock device.
- 4. A person who has been arrested in violation of ARS § 4-244, paragraph 33 (minor consuming alcohol), ARS § 28-1382 (extreme DUI), or ARS § 28-1383 (aggravated DUI).

I understand that this agreement is valid for one (1) year from date of signing.

I further understand that if I do not adhere to this Agreement, and my vehicle is impounded under ARS § 28-3511, I will not be eligible to have my vehicle released prior to the thirty-day mandatory impoundment.

State of Arizona County of Coconino } ss.	
The foregoing instrument was acknowledg by	
	(date)
(name of signer)	
(Notary stamp)	Notary Public Signature
1000 L	na University Police Department

Northern Arizona University Police Department Post Office Box 5602 • Flagstaff, Arizona 86011 • (928) 523-3611 An Internationally Accredited Law Enforcement Agency