COOK COUNTY SHERIFF'S POLICE DEPARTMENT
TOW RELEASE AUTHORIZATION

Tow Vendor: _____

Vehicle Owner Name: _____

Vehicle Owner Address: _____

Vehicle Vin # _____ **Vehicle License Plate #** _____

Make: _____ **Model:** _____

Case Report Number: _____

_____ _____

Officer/Detective Requesting Release of Vehicle (Print Name & Star) | **Signature**

_____ _____

Supervisor Approving (Print Name & Star) | **Signature**

The above vehicle has been released to the owner on the effective date	

Auto Relocation Unit Authorization:

_____ _____

Signature | Date