



**LIEN SALE ORDER FORM**

Your name or Company Name: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Address where vehicle is stored: \_\_\_\_\_

Your mailing address: \_\_\_\_\_

Date of possession (when vehicle was abandoned at your property): \_\_\_\_\_

Date services completed: \_\_\_\_\_ Daily Storage rate: \$\_\_\_\_\_

Cost of unpaid repair services provided: \$\_\_\_\_\_ Towing: \$\_\_\_\_\_ BAR#: \_\_\_\_\_

Vehicle value (mark only one)  Under \$4000  Over \$4000

Known interested parties other than registered owner (if unknown or none, write "none"):

Name:	Name:
Address:	Address:
City/State/Zip:	City/State/Zip:

**Vehicle Information**

Year:	Make/Model :	VIN:
License #:	License State:	Body Type:

I, the undersigned, whose name appears above, hereby certify under penalty of perjury under the laws of the state of California, that I have supplied the names and addresses of any and all parties known by me to have an interest in the above mentioned vehicle(s), and all such parties are listed on this form. I confirm the vehicle information is accurate including the correct vehicle identification number, plate number, engine number or hull number of the vehicle/vessel if required, and vehicle valuation. I also understand, and agree that this lien sale is being processed based upon the information herein, and agree to identify and hold harmless Conar Auto Registration Services, from any legal action arising out the processing of this lien sale, including, but not limited to attorney fees, court costs, and judgements that may arise due to any errors and omissions of any kind. I appoint Conar Auto Registration Services as my attorney in-fact and agent to process and complete all necessary documents to request authorization for the lien sale of the vehicles listed above. I understand that service fees charged by Conar Auto Registration Services are non refundable, even if the lien sale of any vehicle is opposed by any interested party, or if vehicle information supplied by me is inaccurate, and that additional fees may be required to finalize the lien sale procedure.

I have read, understood, and agree to the above.

Client's Signature X \_\_\_\_\_ Date \_\_\_\_\_

Your Name or company name \_\_\_\_\_ Title: \_\_\_\_\_

Email back to [help@californiacartags.com](mailto:help@californiacartags.com) or fax back to 408-258-0229. Thank you.