



Conar Auto Registration Services Lic 61929
VIN Verification | Lien Sale Services

(408) 258-4000

1668 McKee Rd Ste 6 San Jose CA 95116

LIEN SALE ORDER FORM (for vehicles valued less than \$4,000 ONLY, print legibly)

Your name: _____

Company Name (If applicable) _____

Phone: (____) _____ - _____ Email address: _____

Mailing address: _____

Address where vehicle is stored: _____

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

Date services completed: _____ Daily Storage rate: \$ _____ Date you billed your client: _____

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

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 (valued less than \$4,000 only)

Year:	Make/Model :	VIN:
License	License State:	Body Type: If Motorcycle, engine #:

I, the undersigned, whose name appears above, hereby certify under penalty of perjury under the laws of the state of California, that the foregoing is true and correct and I have no information or belief that there is a valid defense to the claim which gives rise to the lien, 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. I also understand, and agree that this lien sale is being processed based upon the information herein, including vehicle valuation (currently valued at less than \$4,000), I further certify (or declare) under penalty of perjury that this lien sale is being requested and will be conducted in accordance with the requirements of California Military and Veterans Code §§407, 408, 409.1, and 409.3, and with the requirements of §§3952, 3953, and 3958 of Title 50 of the United States Code. I 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/vessel information supplied by me is inaccurate, or if I change my mind and decide and don't want to do the lien sale applied for anymore; and that additional fees may be required to finalize the lien sale procedure. I have read and understood the above.

Client's Signature X _____ Date _____

Your Name: _____ Title: _____

Email back to help@californiacartags.com or fax back to 408-258-0229. Thank you.