



Waiver and Release of Liability

"Vehicle Unsafe to Drive On Public Roads"

I hereby acknowledge that I have been informed by "Regal Repair, Inc.", that **my vehicle is unsafe to operate** on public roads and/or highways. I have also been informed and aware that the Department of Motor Vehicles (DMV) clearly states in Vehicle Code section 24002(a) *it is unlawful to operate any vehicle or combination of vehicles **which is in an unsafe condition**, or which is not safely loaded, and **which presents an immediate safety hazard**.*

I further acknowledge and agree, on my own behalf and on behalf of my personal representatives, executors, administrators, employer, spouse and next of kin to hereby Release the "Regal Repair, Inc." from any Liability or claims and hold harmless its respective directors, officers, shareholders, employees, agents, contractors from any and all liability for any loss, further damage to my vehicle, any/and all expense demand or cause of action that I may suffer whether with respect to personal and/or second and third party injury, death, damage or destruction of property which may arise as a result of me choosing to remove my vehicle from the property of the "Regal Repair, Inc." with intentions to use on public roads and/or highways.

VEHICLE INFORMATION

Vehicle Year/Make/Model: _____ Color: _____

VIN #: _____ License: _____ Odometer: _____

I hereby acknowledge that I have read and fully understand the terms of this Waiver and Release of Liability and have received the opportunity to discuss this with my legal counsel and/or Auto Insurance Provider. Further, I acknowledge that I have signed this Waiver and Release of Liability freely and voluntarily without any inducement, assurance, guarantee or/and any oral representation being made.

OWNER DETAILS

(First and Last Name) PRINT

(Signature)

(Date)

NOTIFICATION – TO OWNER'S AUTO INSURANCE PROVIDER

☐ For safety reasons, I have chosen to leave my vehicle at the "Regal Repair, Inc." pending an "Estimate for the Repairs" and inspection from my Insurance Carrier.

I have further requested for the "Regal Repair, Inc." to arrange alternate means of transportation for me:

☐ Rental Car (Payable by customer or authorized and paid by customer's Auto Insurance Provider)

☐ To Personally Transport me to my Home/Workplace

(First and Last Name)

(Email)

(Phone)

(Address)

(City)

(Zip Code)

(Insurance Company)

(Claim Number)

(Date of Accident)