



**SAINT PAUL  
MINNESOTA**

SAINT PAUL POLICE DEPARTMENT  
IMPOUND LOT  
VEHICLE RELEASE

Fax: 651-298-4938  
Email: SPPD-Impound@ci.stpaul.mn.us

VIN # \_\_\_\_\_

DATE: \_\_\_\_\_

PLATE # \_\_\_\_\_

TIME: \_\_\_\_\_

PLEASE COMPLETE THIS FORM, PLEASE INITIAL YOUR OPTION(S).

I, (printed name) \_\_\_\_\_

\_\_\_\_\_ Grant permission to \_\_\_\_\_ (insurance, tow company or authorized person)  
to pick up, inspect and/or tow my vehicle for repairs

\_\_\_\_\_ To photograph/ inspect the vehicle for damages.

\_\_\_\_\_ I no longer have interest in my vehicle. I will turn over the title and keys to the  
St. Paul Police Department via mail. I authorize the St. Paul Police Department to  
dispose of it.

\_\_\_\_\_ I am the owner, but I have lost or misplaced the title. I no longer have  
an interest in my vehicle and authorize the St. Paul Police Department to  
dispose of it.

Attach supporting documents:

-Photo/State ID on a Notarized Statement

\_\_\_\_\_  
Signature of Registered Owner

\_\_\_\_\_  
Notary Public: (signature & printed name)