

# ROAD SERVICE



**KNIGHTS COLLISION EXPERTS** 1924 Broadway  
Brooklyn, NY 11207  
(718) 963-4440

**KNIGHTS COLLISION EXPERTS** 459 Sharrots Road  
Staten Island, NY 10309  
(718) 569-5957

DMV # 7116398

TIME OF CALL 11:57 A.M.	DATE IN 6-20-05	DATE OUT	TIME START A.M. P.M.	TIME FINISH A.M. P.M.	REQUESTED BY	P.O. / CASE #	OFFICER NAME
NAME Kieran Kissen					PHONE # 646 407 6420		
ADDRESS 104-72 112 St							
CITY Queens					STATE	ZIP	
YEAR 2016	MAKE/MODEL Nissan Maxima	COLOR Silver	ODOMETER		DRIVER RAY		
MARKER PLATE # 1C2V10883	STATE NY	VIN #	REGISTERED OWNER				
LOCATION OF VEHICLE LIE EB / 48th Street							
TOWED TO 54th & 48th St							
INSPECTED BY INSURANCE CO.			APPRAISER NAME		DATE	PHONE #	
RELEASED BY			DATE	PHONE #			
REASON FOR TOW			TYPE OF TOW		PERSONAL'S TAKEN BY		
<input type="checkbox"/> ACCIDENT <input checked="" type="checkbox"/> BREAK DOWN <input type="checkbox"/> ABANDONED <input type="checkbox"/> UNREGISTERED <input type="checkbox"/> NO START <input type="checkbox"/> OUT OF GAS <input type="checkbox"/> FLAT TIRE <input type="checkbox"/> FIRE LANE <input type="checkbox"/> LOCK OUT <input type="checkbox"/> NO TRESPASS <input type="checkbox"/> TOW ZONE <input type="checkbox"/> ARREST <input type="checkbox"/> STOLEN <input type="checkbox"/> IMPOUNDED <input type="checkbox"/> SNOW REMOVAL			<input type="checkbox"/> SLING/HOIST <input checked="" type="checkbox"/> FLAT BED/RAMP <input type="checkbox"/> WHEEL LIFT		DATE		
SPECIAL EQUIPMENT USED			TOWED PER ORDER OF		VEHICLE STORAGE TIME		
<input checked="" type="checkbox"/> WINCH <input type="checkbox"/> FLARES <input type="checkbox"/> DOLLIES <input type="checkbox"/> SCOTCH BLOCKS <input type="checkbox"/> RAMPS <input type="checkbox"/> <input type="checkbox"/> SNATCH BLOCKS			<input type="checkbox"/> STATE POLICE <input type="checkbox"/> LOCAL POLICE <input checked="" type="checkbox"/> OWNER OF CAR <input type="checkbox"/> DEALER		FROM TO DAYS @ \$		
METHOD OF PAYMENT			OTHER SERVICES		INDICATE DAMAGED AREA(S) ON VEHICLE:		
<input checked="" type="checkbox"/> CASH <input type="checkbox"/> CHECK DRIVER'S LIC. # <input type="checkbox"/> CREDIT CARD # EXP. DATE			<input type="checkbox"/> SWEEP <input type="checkbox"/> FIRST AID <input type="checkbox"/> REMOVE AXLE <input type="checkbox"/> SECURE LOOSE PARTS		KEYS LEFT Y N RADIO Y N		
AUTHORISED SIGNATURE			DATE		MILEAGE		
DRIVER'S SIGNATURE			DATE		TOWING CHARGE		
					MILEAGE		
					LABOR		
					EXTRA PERSON		
					SPECIAL EQUIPMENT		
					STORAGE		
					SUBTOTAL		
					TAX		
					TOTAL		

**K14283**

We cannot be responsible for damages caused by faulty tires, bumper brackets, etc.  
This company assumes no responsibility for loss or damage by theft, fire or any other  
cause beyond our control, to any vehicle placed with them for storage or repair.

THANK YOU!

Vehicle Photo for Invoice K14283