

ROAD SERVICE

KNIGHTS COLLISION EXPERTS KNIGHTS COLLISION EXPERTS



1924 Broadway
Brooklyn, NY 11207
(718) 963-4440

459 Sharotts Road
Staten Island, NY 10309
(718) 569-5957

DMV # 7116398

TIME OF CALL 1034 A.M.	DATE IN 6/22/25	DATE OUT 	TIME START A.M.	TIME FINISH A.M.	REQUESTED BY Anthony	P.O. / CASE #	OFFICER NAME
NAME Anthony				PHONE # 201-214-0676			
ADDRESS 280 American Legion P.A.							
CITY 				STATE 	ZIP		
YEAR 2013	MAKE/MODEL Fonda CRV	COLOR blue	ODOMETER 	DRIVER Kay	REGISTERED OWNER		
MARKER PLATE # WQ1MXT13P		STATE NY	VIN # 				
LOCATION OF VEHICLE Van Wyck NB exit 11 55th Ave & 48th Street							
INSPECTED BY INSURANCE CO.		APPRAYER NAME	DATE		PHONE #		
RELEASED BY		DATE	PHONE #				
REASON FOR TOW		TYPE OF TOW		PERSONAL'S TAKEN BY		DATE	PHONE #
<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"/>		<input type="checkbox"/> SLING/HOIST <input checked="" type="checkbox"/> FLAT BED/RAMP <input type="checkbox"/> WHEEL LIFT <input type="checkbox"/>					
		TOWED PER ORDER OF		VEHICLE STORAGE TIME		DAYS @ \$	
		<input type="checkbox"/> STATE POLICE <input type="checkbox"/> LOCAL POLICE <input checked="" type="checkbox"/> OWNER OF CAR <input type="checkbox"/> DEALER		FROM _____ TO _____			
		OTHER SERVICES		INDICATE DAMAGED AREA(S) ON VEHICLE:		KEYS LEFT	
		<input type="checkbox"/> SWEEP <input type="checkbox"/> FIRST AID <input type="checkbox"/> REMOVE AXLE <input type="checkbox"/> SECURE LOOSE PARTS				Y N	
						RADIO	
						Y N	
SPECIAL EQUIPMENT USED				MILEAGE		TOWING CHARGE	
<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"/>		FINISH		MILEAGE			
		START		LABOR			
		TOTAL		EXTRA PERSON			
METHOD OF PAYMENT		LABOR TIME		SPECIAL EQUIPMENT			
<input checked="" type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> DRIVER'S LIC. # _____ <input type="checkbox"/> CREDIT CARD # _____ EXPI. DATE _____		FINISH		STORAGE			
		START		SUBTOTAL			
		TOTAL		TAX			
AUTHORIZED SIGNATURE X		DATE		TOTAL		136.00	
DRIVER'S SIGNATURE		DATE		DRIVER # TRUCK #		THANK YOU!	

K 14473

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.

Vehicle Photo for Invoice K14473