

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 9:30 PM	DATE IN 6-6-25	DATE OUT	TIME START A.M. P.M.	TIME FINISH A.M. P.M.	REQUESTED BY Help	P.O. / CASE #	OFFICER NAME
NAME Nathia Mayo		ADDRESS 44 W Raymond Avenue		CITY ROOSEVELT		STATE NY	ZIP 11575
YEAR 2024	MAKE/MODEL Mercedes	COLOR Grey	ODOMETER	DRIVER Same	REGISTERED OWNER Same		
MARKER PLATE # HDW8807	STATE NY	VIN #	LOCATION OF VEHICLE LIE w/B Little Neck/CIP				
TOWED TO 106ST & Northern Blvd		INSPECTED BY INSURANCE CO.		APPRAISER NAME		DATE	PHONE #
RELEASED BY		DATE	PHONE #				
REASON FOR TOW <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 checked="" 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 checked="" type="checkbox"/> NO TAG/LOCK		TYPE OF TOW <input checked="" type="checkbox"/> SLING/HOIST <input type="checkbox"/> FLAT BED/RAMP <input type="checkbox"/> WHEEL LIFT TOWED PER ORDER OF <input type="checkbox"/> STATE POLICE <input type="checkbox"/> LOCAL POLICE <input type="checkbox"/> OWNER OF CAR <input type="checkbox"/> DEALER		PERSONAL'S TAKEN BY DATE PHONE # VEHICLE STORAGE TIME FROM TO DAYS @ \$ INDICATE DAMAGED AREA(S) ON VEHICLE: KEYS LEFT Y N RADIO Y N			
SPECIAL EQUIPMENT USED <input checked="" type="checkbox"/> WINCH <input type="checkbox"/> FLARES <input type="checkbox"/> DOLLIES <input type="checkbox"/> SCOTCH BLOCKS <input type="checkbox"/> RAMPS <input checked="" type="checkbox"/> STRAPS <input type="checkbox"/> SNATCH BLOCKS		OTHER SERVICES <input type="checkbox"/> SWEEP <input type="checkbox"/> FIRST AID <input type="checkbox"/> REMOVE AXLE <input type="checkbox"/> SECURE LOOSE PARTS		MILEAGE FINISH START TOTAL LABOR TIME FINISH START TOTAL EXTRA PERSON FINISH START TOTAL		TOWING CHARGE 125 MILEAGE LABOR EXTRA PERSON SPECIAL EQUIPMENT STORAGE SUBTOTAL 125 TAX 11 10 TOTAL 136 10	
METHOD OF PAYMENT <input checked="" type="checkbox"/> CASH <input type="checkbox"/> CHECK DRIVER'S LIC. # <input type="checkbox"/> CREDIT CARD # EXP. DATE		AUTHORIZED SIGNATURE DATE 6-6-25		DRIVER'S SIGNATURE DATE 6-6-25		DRIVER # 162	

K14028

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!