



**Recovery Authorization**  
Must Be Filled Out  
Completely & Signed

P.O. Box 82  
Oxford, WI 53952  
608-296-3848 office  
608-697-0346 mobile  
www.state-recovery.com  
info@state-recovery.com

**Fax us anytime at 561.423.7984 (comes through email). Include any judgments or letters.**

LIEN HOLDER				CONTACT			
ADDRESS (OR LAST KNOWN)			CITY		STATE	ZIP CODE	
PHONE		CELL PHONE		FAX			
REFERRED BY			YOUR EMAIL				
DEBTOR		MAY WE SKIPTRACE? <input type="checkbox"/> YES <input type="checkbox"/> NO	DOB	SOCIAL SECURITY NUMBER			
ADDRESS			CITY		STATE	ZIP CODE	
PHONE		CELL PHONE		EMAIL			
EMPLOYER		EMPLOYER ADDRESS		EMPLOYER PHONE			
CO-DEBTOR <input type="checkbox"/> NONE		MAY WE SKIPTRACE? <input type="checkbox"/> YES <input type="checkbox"/> NO	DOB	SOCIAL SECURITY NUMBER			
ADDRESS (OR LAST KNOWN)			CITY		STATE	ZIP CODE	
PHONE		CELL PHONE		EMAIL			
EMPLOYER		EMPLOYER ADDRESS		EMPLOYER PHONE			
YEAR	MAKE	MODEL		COLOR	VARIATION		
PLATE NUMBER		STATE	VIN	TRANSMISSION <input type="checkbox"/> AUTO <input type="checkbox"/> MAN	DOORS <input type="checkbox"/> 2-DR <input type="checkbox"/> 4-DR		
REPLEVIN COURT CASE NUMBER		CASE COUNTY & STATE			KEY SUPPLIED? <input type="checkbox"/> YES <input type="checkbox"/> NO		
ADDITION HELPFUL INFORMATION							

**Repossession in Wisconsin is governed by the Wisconsin Consumer Protection Act.  
We recommend obtaining legal advice prior to placing an assignment.**

This is the lien holder's authorization for State Recovery Service to act as its agent to recover on site the above listed collateral. We agree to indemnify and hold State Recovery Service harmless from and against any and all claims, damages, losses and actions including reasonable attorney fees, resulting from and arising out of your efforts to recover collateral, except, however, as such may be caused by or arise out of negligence or unauthorized acts on the part of State Recovery Service, its officers, employees or agents. It is agreed that this contract is executed within Wisconsin, and that all applicable state laws shall be followed. If two or more states are involved, the laws of all the states shall be applicable. The signer below is either the lien holder, or a duly authorized agent or attorney of the lien holder.

**SIGNATURE:** \_\_\_\_\_ **PRINT NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_