



**Third party collection
authorization form**

CLIENT NAME :

CLIENT ACCOUNT NUMBER :

SALE(S) NUMBER(S) :

LOT(S) NUMBER(S) :

.....

OR

PROPERTY RECEIPT NUMBER.

NAME OF AUTHORIZED PERSON OR AGENT :

.....

5 FIRST DIGITS OF A VALID GOVERNMENT ISSUED ID :

COLLECTION DATE :

48h notice necessary

DATE :

PRINTED NAME :

.....

.....

SIGNATURE :