Authorization of Release

To (Seller Name and Account Number):	
I,, here	by authorize the release of
the following listed items to (Agent Name & Phone Number),	
·	
Please include the Certificate Number and Item Description b	elow:
ITEM:	
acknowledge that once my authorized agent has removed ite premises, the sale is considered final and there will be no refu paid.	
Buyer's Signature:	_
Buyer's Name (Print):	_
Title:	
Buyer's Phone Number:	
Date:	
Estimated Pick Up Date and Time:are subject to approval and must be confirmed with the seller	(Date and Time r at least 24 hours prior to