



263 Luxomni Road  
Lilburn, GA 30047

2315 Murphy Boulevard  
Gainesville, GA 30504

2775 Simpson Circle  
Norcross, GA 30071

Phone: 770-279-8424

## IMPOUND AGREEMENT

- Please consider this a written agreement between Statewide Wrecker Service, Inc. and the below listed property owner (or authorized agent for the owner).
- Vehicles/Trailers or any other items will be towed at the request of the property owner (or authorized agent for the owner) and will be relocated to Statewide Wrecker Service, Inc.
- The impounding rates listed below will be paid by the item owner before retrieving it from Statewide Wrecker Service, Inc.
- The owner of the items may claim the item during office hours. Office hours are 8 am - 6 pm, 7 days a week.
- The owner will need to contact Statewide Wrecker Service, Inc. for further information at 770-279-8424.
- The owner of the item is responsible for all fees incurred from impounding such items.
- An impound sign must be posted on the above property for over 24 hours before the impoundment.
- The above is in compliance with Georgia Code 40-11.
- Notice of Property Management change needs to be submitted to Statewide in writing and a new agreement executed.

<b>Towing</b>	<b>\$228 - \$1,105</b>
<b>Storage</b>	<b>\$33 - \$100/day</b>
<b>Notification Fee</b>	<b>\$26 &amp; \$65</b>

This is **not** a patrol notice. The property will **not** be patrolled. Notifications to Statewide Wrecker Service, Inc. will need to be made by the property owner or the listed authorized agent prior to impounding either by phone (770-279- 8424) or by email ([dispatch@swsatlanta.com](mailto:dispatch@swsatlanta.com)).

Name of Management Company (if applicable)\_\_\_\_\_

Posted Property Name:\_\_\_\_\_

Posted Property Address:\_\_\_\_\_

City:\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_

Phone Number:\_\_\_\_\_ Email\_\_\_\_\_

List any authorized agents that will be allowed to have vehicles/trailers or other items removed:

Name/Phone\_\_\_\_\_ Name/Phone\_\_\_\_\_

Name/Phone\_\_\_\_\_ Name/Phone\_\_\_\_\_

Name/Phone\_\_\_\_\_ Name/Phone\_\_\_\_\_

Name/Phone\_\_\_\_\_ Name/Phone\_\_\_\_\_

Name/Phone\_\_\_\_\_ Name/Phone\_\_\_\_\_

Owner/Authorized Agent PRINTED Name:\_\_\_\_\_

Owner/AuthorizedAgentSignature:\_\_\_\_\_ Date:\_\_\_\_\_

### Statewide Office Use Only

Signs Posted:

By:

Entered:

By:

