

**CLAIM FOR NET PROCEEDS OF
SALE AT AUTO AUCTION**

Name: _____ Date of Birth: _____

Address: _____

Phone #: _____ Driver's License #: _____

Vehicle Year: _____ Vehicle Make: _____ Vehicle Model: _____

License Plate: _____ VIN: _____

Date Towed: _____ Date Sold: _____ Date Claim Initiated: _____

Tow Fee: \$ _____

Days in Storage: _____ @ \$ _____ per day: \$ _____

Administrative Fee: \$ _____

Total: \$ _____

Selling Price: \$ _____

Ownership Verified by: _____ Net Proceeds of Sale: \$ _____

I hereby make claim to the City Of Minneapolis for the net proceeds resulting from the sale of the above vehicle and that I was the sole owner of the vehicle at time of auction. Acceptance of net proceeds of sale shall constitute acknowledgement that I have no further right for claims against the City with respect to the above vehicle.

Date: _____ Signature: _____

Claim must be received by the Impound Lot within 90 days of auction date.

Mail completed form to:
Minneapolis Impound Lot
51 Colfax Avenue North
Minneapolis, MN 55405