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| 3 in 1 Business Solutions, LLC  PO Box 47275  Indianapolis IN 46247-0275  317-491-5376 phone 317-829-1192 fax [3in1businesssolutions@gmail.com](mailto:3in1businesssolutions@gmail.com) – e-mail |
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| Business Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Representative (name of person requesting lien)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title with company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Physical Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Vehicle Information  Year \_\_\_\_\_\_ Make \_\_\_\_\_\_\_\_\_ Model \_\_\_\_\_\_\_\_\_ Color \_\_\_\_\_\_\_\_\_\_\_\_  VIN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Plate Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Financial Information  Services Provided \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Service \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Original Invoice $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Owed $ \_\_\_\_\_\_\_\_\_\_\_  Daily Storage Fee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Storage Fee Started \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please Fax back to 317-829-1192 or email to: 3in1businesssolutions@gmail.com  I certify that the information I have given on this form is complete, correct, and within my rights as a servicer of this vehicle. I represent and warrant that I have the authority to execute this document on behalf of the business listed above. I understand my failure to provide complete, accurate and truthful information may result in civil and criminal penalties against me. I understand and agree that any payment made to 3-in1 Business Solutions is final and NON-REFUNDABLE.  I shall indemnify and hold harmless 3 in 1 Business Solutions and its directors, officers, employees, and agents from and against all allegations, claims, actions, suits, demands, damages, liabilities, obligations, losses, settlements, judgments, costs and expenses (including without limitation attorneys’ fees and costs) which arise out of, relate to or result from any act or omission of information in vehicle listed above.  I acknowledge that 3 in 1 Business Solutions and its directors, officers, employees, and agents are 3rd party processors and have no interest in the vehicle listed above.  SIGNATURE IS REQUIRED FOR PROCESSING.  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |