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Release

(Property Damage Only)

County of Hidalgo Safety Division
Lauro Torres
9805 N. 10th Street
McAllen, Texas 78504

Claim Number: 0926220385

For The Sole Consideration Of: \$17,565.00 Seventeen thousand, five hundred sixty-five dollars and zero cents: ACV: \$18,575.00, less salvage retained \$1,010.00. The receipt and sufficiency of which is hereby acknowledged, the undersigned hereby and forever discharges Voyager Indemnity Insurance Company and Juan DeLeon, his heirs, executors, administrators, agents and assigns and all other persons, firms or corporations liable, or who may be claimed to be liable, none of whom admit liability to the undersigned, but all expressly deny any liability, from any and all claims, demands or suits of any kind on account of and resulting from damage to property caused by an accident which occurred on or about the 22nd day of September 2022, to a 2018 Malibu VIN#1G1ZC5ST2JF230228 which was struck by our insured Juan DeLeon, approximate location, Weslaco, Texas.

Undersigned hereby declares that the terms of this settlement have been completely read and are fully understood and voluntarily accepted for the purpose of making a full and final compromise adjustment and settlement of any and all claims, disputed or otherwise, on account of the damages above mentioned, and for the express purpose of precluding forever and further or additional claims relating to property damage arising out of the aforesaid accident.

Undersigned hereby accepts draft or drafts as final payment of the consideration set forth above.

This release expressly reserves all rights of the parties released to pursue their legal remedies, if any, against the undersigned, agents and assigns.

Signature **Date**

Printed Name: _____

Personally appeared before me, this ____ day of _____, _____, the undersigned authority with whom I have identified, who acknowledged that the foregoing instrument was executed for the purpose therein contained.

Notary: _____

State Of _____

County Of _____

Subscribed and sworn to before me this day of _____, Month _____, 20__

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SALVAGE RETENTION FORM

Name: County of Hidalgo
 Claim Number: 0926220385
 Date of Loss: September 22, 2022

We, County of Hidalgo, understand that the damages to our 2018 Chevrolet Malibu, **VIN #: 1G1ZC5ST2JF230228**, exceeds the Actual Cash Value (ACV) as a result of an accident on September 22, 2022. I understand that the value of my car at the time of loss was \$18,575.00. The current salvage value of this property is \$1,010.00.

Actual Cash Value:	\$18,575.00
Less Salvage Value:	\$1,010.00
Net Loss:	\$17,565.00

It is my understanding that if I chose to retain the salvage I must comply with all applicable state and motor vehicle title laws pertaining to total loss vehicles.

Signature: _____

Printed Name: _____

Full Address: _____

Subscribed and sworn before me this _____ date of _____ 2022

My commission expires: _____.

Notary: _____