

ASSOCIATED REPORTING SYSTEMS, INC. d.b.a.
NORTHEAST ADJUSTMENT BUREAU
24 River St Winchester, MA 01890
Phone (781)721-3300 Fax (877)622-6311

Authorization and Hold Harmless Agreement

Date: _____
Client: _____ Account # _____
Address: _____
City: _____
Phone: _____ Ext _____
DEBTOR: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ SSN: _____ DOB: _____
VIN# _____

It is agreed that Northeast Adjustment Bureau does not accept accounts on a CONTINGENCY basis.

This is your authorization to act as our agents to collect or repossess the above collateral.

We agree to indemnify and hold you harmless from and against any and all claims, damages, losses, and actions, including reasonable attorney fees, resulting from and arising out of your efforts to collect and/or repossess claims, except however such as may be caused by or arise out of negligence or unauthorized act on the part of you, your company, its officers, employees or its agents.

Assigned By: _____

Signature: _____