

NON-COMPETITION AGREEMENT

During the term of this Agreement, the Employee shall not directly or indirectly, either as an employee, employer, consultant, agent, principal, partner, stockholder, corporate officer, director, or in any other individual or representative capacity, engage or participate in any business that is in competition any manner whatsoever with the business of the Employer. On termination of employment, whether by termination of this Agreement, by wrongful discharge or otherwise, the Employee shall not directly or indirectly engage in competition with the Employer in the territory of _____, for a period of _____ years after said termination. In addition, the Employee, for the same period of time, after termination, shall not contact any employee of the Employer for the purpose of encouraging that employee to in any way compete with, or leave the employment of, the Employer. This covenant shall be construed as an agreement independent of any other provision of this Agreement. The existence of any claim or cause of action of the Employee against the Employer, whether predicated on this Agreement or otherwise, shall not constitute a defense to the enforcement by the Employer of this covenant. In the event of a breach or threatened breach by the Employee of the obligations of this Agreement, the Employee acknowledges that the Employer will not have an adequate remedy at law and shall be entitled to such equitable and injunctive relief as may be available to restrain the Employee from the violation of the provisions of this Agreement. Nothing in this Agreement shall be construed as prohibiting the Employer from pursuing any other remedies available for breach or threatened breach of this covenant not to compete including the recovery of damages from the Employee.

DATED this _____ day of _____, 20____.

Employer

Employee

LAW ENFORCEMENT NOTICE

NOTICE PURSUANT TO F.S. 713.78

As per F.S. 713.78 4(d) a good faith effort has been performed and we are unable to locate the owner, lien-holder, and insurance company's name and address of the following vehicle.

Towing Company Information

Company Name _____

Address _____

Phone () _____ Fax () _____

Contact (Print) _____ Signature _____

Vehicle Information

Year _____ Make _____ Model _____ Color _____

Vehicle Identification # _____

Tag # _____ Temp Tag # _____ State _____ Possible state of registration _____

Type of tow (IP, PD, other) _____

Law Enforcement Agency of Jurisdiction

Agency Name _____

Mail / Hand Delivery Date _____ Certified Mail # _____

Hand delivered to _____

INDEMNIFICATION AND HOLD HARMLESS

(RELEASE OF VEHICLE WITHOUT OWNER PRESENT)

I state that I am a lawful agent of the owner, insurance company or lienholder and that I have lawful authority to obtain possession of the following vehicle:

(vehicle description and identification number)

and that I am empowered by and have full authority to bind my principal to the following representations:

1. That I have lawful authority and/or permission of the owner of said vehicle to obtain possession;

2. That I agree to indemnify and hold _____

_____ harmless from all claims and liability of whatever nature asserted against said company by reason of its release of possession of said vehicle to me, including any reasonable attorney fees incurred.

Dated this _____ day of _____, 20 _____.

By: _____
(name)

(address)

(telephone number)

NOTARY

PASSENGER(S) RELEASE AND WAIVER

I, _____
(Printed Name)
(the undersigned), for and in consideration of the granting of permission by _____

(Tow Truck Company)
(Tow Truck Company) for said undersigned to travel in said Tow Truck Company's vehicle as a passenger, hereby hold(s) harmless and release(s) and forever discharge(s) said Tow Truck Company and _____

(Tow Truck Driver)
either in his or her individual capacity or by reason of his or her relationship to the Tow Truck Company, from any and all claims and demands whatsoever, which the undersigned and any of them, and the heirs, representatives, executors, and administrators thereof, or any other persons acting on the behalf of their respective agents, have or may have against the Tow Truck Company or the above-named Tow Truck Driver, by reason of any accident, illness, or death, or other consequence(s) arising or resulting directly or during said travel, or at any time subsequent thereto, including the negligence of the Tow Truck Company or the above-named Tow Truck Driver, excepting only such injuries caused solely by gross negligence or willful misconduct.

I understand that riding as a passenger in a tow truck vehicle may expose me to certain risks of injury or death and I freely and voluntarily assume any and all risks of injury, including death, which might result from my participation in this activity. I understand that the dangers and risks of riding as a passenger in a tow truck vehicle include, but are not limited to, physical injury, illness, and/or death.

I hereby affirm that I have the prudence, judgment, emotional stability, physical fitness, and/or physical ability to travel as a passenger in a tow truck vehicle.

Dated this _____ day of _____, 20_____.

Passenger

Tow Truck Driver, on behalf of:

Tow Truck Company

ILLEGAL PARKING TOW-AWAY FORM

As the property owner, manager, or lessee; Tow Away signs are posted as per FS 715.07. I am hereby requesting removal of this vehicle. I agree to hold harmless from any and all costs, damages and attorney's fees resulting from the removal and towing of this vehicle.

As the property owner, manager, or lessee; This vehicle is restricting normal operation of business as per FS 715.07(5)(f). I am requesting the removal of this vehicle without Tow Away signs posted. I agree to hold harmless from any and all costs, damages, and attorney's fees resulting from the removal and towing of this vehicle.

Name (Print): _____

Company Name (Print): _____

Property Address: _____

Phone: _____

City: _____ State: _____ Zip: _____

Sign: _____ Date: _____

Vehicle Yr: _____ Color: _____ Make: _____

Tag Number: _____ State: _____

VIN Number: _____

POLICE DEPT. NOTIFIED _____ TIME: _____ DATE: _____

TOWING COMPANY _____

PHONE () _____ FAX () _____