



POWER OF ATTORNEY FOR *VEHICLE PICK-UP*

Please be advised that:

Transporter Company/Individual Name:		
Company/Individual Address:		
City:	State:	Zip:
Phone:	Fax:	
E-Mail:		

is authorized to pick up vehicles from IAA on behalf of

_____ (buyer name)

Signature of Owner/President

Buyer Number

Date

Please email or fax completed and signed form to your local IAA Branch or email or fax to Buyer Services.
Insurance Auto Auctions | ATTN: Buyer Services | 701 Harger Road, Suite 201 | Oak Brook, IL 60523
E-mail: cservice@iaai.com | Fax: 630-382-5628