**Liability Release Form**

**Car release of liability form in case of accident**

**Personal details:**

[Your Name]

[Your Address]

[City, State, ZIP]

[Email Address]

[Phone Number]

[Date]

**Recipient details:**

[Recipient's Name]

[Recipient's Address]

[City, State, ZIP]

**Re: Release of Liability for** **[Car-related Incident]**

Dear [Recipient's Name],

I, [Your Name], hereby acknowledge and declare that I am the registered owner of the vehicle with the following details:

[Vehicle Make]

[Vehicle Model], [Year]

[VIN]

This letter serves as a Release of Liability for any and all claims, demands, causes of action, liabilities, costs, and expenses arising from the following incident involving the aforementioned vehicle:

**Date of Incident: [Date]**

**Description of Incident:** **[Briefly describe the incident]**

By signing this Release of Liability Form, I acknowledge that I have fulfilled all necessary requirements and obligations with the **Department of Motor Vehicles (DMV)** and have provided all relevant information regarding the incident.

In consideration for the release and discharge provided herein, the undersigned [Your Name] hereby releases, discharges, and holds harmless [Recipient's Name], their employees, officers, agents, and representatives, from any and all claims, demands, causes of action, liabilities, costs, and expenses, whether known or unknown, arising out of or in any way connected with the aforementioned incident.

I understand that by signing this Release of Liability Form, I am releasing the above-mentioned parties from any future claims or actions related to the incident, and I acknowledge that I have read and understood the terms and implications of this release.

This Release of Liability shall be binding upon myself, my heirs, executors, administrators, and assigns.

Should any dispute or legal action arise from the incident, I agree that the laws of [State] shall apply, and any legal proceedings will take place in the appropriate courts of [City, State].

**Acknowledgement:**

Please signify your agreement to the terms and conditions stated herein by signing and dating this Release of Liability Form below:

Sincerely,

[Your Name]

[Your Signature]

[Date]

**Recipient signatures:**

I, [Recipient's Name], hereby acknowledge receipt of this Release of Liability Form and confirm my agreement to the terms and conditions mentioned herein.

Sincerely,

[Recipient's Name]

[Recipient's Signature]

[Date]

[Notary Public Stamp/Seal (if applicable)]