

BENTLEY UNIVERSITY POLICE DEPARTMENT

175 FOREST STREET, WALTHAM, MA 02452
TEL: (781) 891-2201, FAX: (781) 891-2559

Motor Vehicle Storage Agreement & Waiver

Date: _____/_____/20_____

I, _____, hereby release Bentley University, the Bentley University Police Department and their respective personnel and agents, from any and all claims of damage to my motor vehicle arising from any source whatsoever, including but not limited to, fire, theft, vandalism, flood, and an Act of God, while my motor vehicle is stored on Bentley University property.

I agree to permit Bentley University to move my motor vehicle if necessary to facilitate repairs or renovations to the storage area or for reasons related to public safety. I agree to waive any liability that Bentley University or its agents might face resulting from said movement of vehicle.

I agree to keep my motor vehicle properly registered with the state it is registered in and pursuant to the General Laws of Massachusetts. **Vehicles must be properly registered and insured to remain on Bentley property.**

I agree to take possession of said motor vehicle no later than: _____/_____/20_____

****NOTE:** Failure to take possession of the vehicle by the date indicated may result in the towing of the vehicle from Bentley property at the owner's expense**

Name (Please Print): _____

Address: _____

City: _____ State: _____ Email: _____

Telephone Number: (Cell) _____ (Home) _____

Vehicle Make: _____ Model: _____ Year: _____ Color: _____

License Plate: _____ State: _____ Exp: _____

Insurance Company: _____ Exp: _____

Signature of Owner: _____ Date: _____

In case of Emergency, please notify: _____ Relationship: _____

Address: _____

Telephone: _____ Email: _____

WHERE TO PARK: _____

For Office Use Only

University Police Department Employee Accepting This Form: _____

Name

Date