PRIVATE SETTLEMENT

Location:		City:		State:	
Motor Vehicle #1:					
Plate #: Ma	ake:	Model:	Year:		
Driver Name:	Address:		City:	State:	
License #:	Cell #:()		Fax #:()		
Owner Name:	Address:		City:	State:	
Cell #:()	Fax #:()				
Motor Vehicle #2:					
Plate #: Ma	ake:	Model:	Year:		
Driver Name:	Address:		City:	State:	
License #:	Cell #:()		Fax #:()		
Owner Name:	Address:		City:	State:	
Cell #:()	Fax #:()				
There are no personal injuries or d	eaths involved.				
The above parties have agreed to s	settle this matter as follo	ws: (delete *a or	*b as applicable)		
*a. Neither party shall be li incurred as a result of the a			y loss or damages (d	lirect or indirect)	
*b. Without any admission which (owner receiving coldamages and costs incurre	mpensation) herby ackno	wledges receipt t	hereof in full and fin		
Both parties have not and will not	make a police report of t	his accident.			
Name (paying party):	Signa	Signature:		Date:	
Name (owner receiving navment):		Signature:	Date:		