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| **NOT PROTECTIVELY MARKED**  **PSNI Managed Vehicle Recovery, Storage and Disposal Scheme**  **FEE REIMBURSEMENT APPLICATION** | |
|  | |
| **Vehicle Owner Details** |  |
| Full Name |  |
| Address |  |
| Postcode |  |
| Telephone Number |  |
| Email Address |  |
|  | |
| **Vehicle Details** |  |
| Make/Model |  |
| Registration |  |
|  | |
| **Incident Details when Recovered** |  |
| Police Incident No. | C&C |
| Location |  |
| Date |  |
| Time |  |
| Recovery Operator |  |
| Recovery Ref No. |  |
| Total Amount Paid | £ |
|  | |
| **Free Text**  (Please give reason why you believe you are entitled to reimbursement) |  |
| This form should be emailed to:  [**vehiclerecoveryliaisonofficer@psni.pnn.police.uk**](mailto:vehiclerecoveryliaison@psni.pnn.police.uk)  or send to:  **VLRO Road Policing Development, 4-8 Ravarnet Road, Lisburn BT27 5NB** | |