

# Property Release Authorization Form

## Hotel Lost and Found

Date: \_\_\_\_\_

### Guest/Owner Details

Full Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address (optional): \_\_\_\_\_

ID Type: \_\_\_\_\_

ID Number: \_\_\_\_\_

Address: \_\_\_\_\_

### Description of Lost Property

Item Description: \_\_\_\_\_

Location Found: \_\_\_\_\_

Date Found: \_\_\_\_\_

Additional Details: \_\_\_\_\_

### Authorization

I, the undersigned, confirm that I am the rightful owner or authorized representative of the above-mentioned property. I authorize the hotel to release the described property to me or to the person I designate. I hereby release the hotel and its staff from all liability upon release of the property.

If authorizing another person to collect on your behalf, provide name:

\_\_\_\_\_

\_\_\_\_\_  
Guest/Authorized Receiver Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Hotel Staff Signature

Date: \_\_\_\_\_

