



ONLINE ASSIGNMENT FORM

95 Miami Street - Buffalo, N.Y. 14204
Office: (716) 856-7533 - Fax: (716) 856-7649
Toll Free 1-800-515-0220

Your Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Fax: _____

Email Address: _____

DEBTOR INFO

Debtor Name: _____

Debtor Address: _____

Telephone: _____

City/State/Zip: _____

Email Address: _____

Social Security No: _____

Date of Birth: _____

Employer: _____

Employers Address: _____

City/State/Zip: _____

Telephone: _____

Fax: _____

Collateral

Year/Make/Model: _____

Plate/State/Color: _____

Key Numbers: _____

VIN Number: _____

Loan Info

Loan Number: _____

Date Past Due: _____

Monthly Payment: _____

Assignment Type: Involuntary Voluntary Field Position
(Please check one)

Additional Info: _____

This is your authorization to act as our agent to collect or repossess the above collateral. We agree to indemnify and hold Nu-Era Services Inc. Harmless from and against any and all claims, damages, losses and actions including reasonable legal fees, resulting from and arising out of your efforts to collect and or repossess claims, except, however, as such may be caused by or arise out of negligence or unauthorized acts on the part of you, your company, it's officers, employees or it's agents.

Authorized by: _____ Date: _____