

- 1. Complete the form below.
- 2. Lock your car and park it in our lot.
- Be sure to leave a phone number where you can be reached.
   Place your keys and this form in our drop box.

First & Last Name:	· · · · · · · · · · · · · · · · · · ·	
Street Address:		
City:	State:	Zip Code:
Phone #:	_ Work Phone #:	
Vehicle Year: Make & Model:		
Color: License Plate Number:		
Service / Problems Checklist		
□ Change Engine Oil And Filter w/Inspection □ 15 / 30 / 45 / 60 / 75 / 90 / 105 / 120k Mile □ Tire Replacement □ Tire Rotation or Balance □ Wheel Alignment □ Brake Inspection or Service □ Exhaust Service □ Wiper Blades □ Automatic/Manual Transmission Service □ Air Conditioning Service  Comments / Notes & Requ	Service (circle one)	□ Shock Replacement □ Check Engine Light Diagnostics □ Electrical System Diagnostics □ Tire Pressure/TPMS Issue □ Clutch Replacement/Service □ Rattle/Clunk/Noise Diagnostic □ Drive Belt Replacement □ Engine/Transmission Performance Issue
I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and / or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and / or inspection. An express mechanic's lien is hereby acknowledged on the above listed vehicle to secure the amount of repairs thereto. I agree that this service center performing repairs to my vehicle is not responsible for unavailability of parts or delays in part(s) shipments beyond the service center's control, nor responsible for loss or damage to the above mentioned vehicle or articles left in vehicle in case of fire, theft or any other cause beyond the service center's control. I understand, because of the EARLY BIRD SERVICE, I am unable to receive a copy of the estimate cost.		
PLEASE SIGN (Signature) X  DATE:		<del></del>