

Authorization For Service

ABC AUTO REPAIR

1234 MAIN STREET
 ANYTOWN, USA 00000
 (000) 000-0000

REG #

Mr. Davidson
 30 Echo Bay Drive
 NEW YORK, NY 10023-

Tech	Qty.	Part Number	Description	Each	Total	Date	10-01-1998	Mileage	0	Invoice	20050
SM			FRONT BRAKE SERVICE INCLUDES: Remove wheels & inspect brake system, resurface brake rotors, clean caliper slides, replace brakes pads, bleed hydraulic system and road test.		63.12						
SM			MACHINE BRAKE ROTOR		18.00						
SM	1	MKD50	DISK BRAKE PAD	23.99	23.99						
SM			REAR WHEEL BRAKE SERVICE INCLUDES: Remove wheels and Inspect brake system, resurface brake drums, clean backing plates, replace brake shoes, bleed hydraulic system, adjust parking brake and road test.		58.26						
SM			MACHINE DRUM		16.00						
SM	1	245	BRAKE SHOES	21.95	21.95						
SM			ROTATE TIRES		7.50						
Brake Service performed brought brakes back to or exceeded Manufacture specifications											
Total for Brake Service					208.82						
SM	[]		CHANGE OIL LUBE & OIL FILTER INCLUDES: Change motor oil, replace oil filter, lubricate all grease fittings, inspect & correct fluid levels, check & adjust tire presure, check for oil leaks and inspect undercarriage.		11.97						
SM	1	111	OIL FILTER	6.95	6.95						
SM	5	P30	PENZOIL 10/30	2.50	12.50						
Total for Oil, Lube & Filter					31.42						
Diagnostic/Estimate Fee \$ _____											
						Model	1994 CHEVROLET CORVETTE V8-350 5.7L				
						License	MWE123				
						Vin					
						Home	914-555-1212	Work	914-555-1212		
						Additional repair authorization					
						Date	_____	20__	Time	_____	
						Person giving authorization					
						Person recieving authorization					
						Revised date of completion _____					
						Estimated Cost \$ _____					
						Specific Guarantee Exclusions on Additional Repair					
						Service Requested:					
						Estimated Cost _____					
						Proposed completion Date: _____					
						Vehicle delivered: [] By Owner [] Third Party [] Towed					
						Labor is charged: [] Hourly [] Flat Rate [] Both					
						FL Disposal Fee	1.50	Work Requested	240.24		
						Shop Supplies/Disp	7.21	Sales Tax	14.85		
								Total	263.80		

PLEASE READ AND SIGN BELOW

I hereby authorize the above repair work to be done to my vehicle including the necessary labor, parts materials, fees and taxes. This repair shop is not the insurer of my vehicle. This repair shop shall not be liable for any loss or damage to my vehicle or its contents (including articles left in the vehicle) that are not sustained by me or anyone claiming by, through or under me except for loss or damage attributable to the willful gross negligence. You and your employees may operate the vehicle for purposes or testing, inspection or delivery. An express mechanic's lien is acknowledged by me on the vehicle to secure the amount of the repairs including any legal fees, court costs or collection fees thereto.

SIGNED _____

SECOND PERSON WHO MAY APPROVE REPAIRS _____

PHONE (HOME) _____ PHONE (WORK) _____

I request parts be saved for inspection: [] Yes [] No

<p>PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:</p> <p>I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100</p> <p>[] I REQUEST A WRITTEN ESTIMATE</p> <p>[] I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COST DOES NOT EXCEED \$_____. THE SHOP MAY NOT EXCEED AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.</p> <p>[] I DO NOT REQUEST A WRITTEN ESTIMATE</p> <p>Signature: _____ Date: _____</p>
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