



Early/Late Drop Form

AUTO REPAIR & BODY SHOP

This will be your temporary repair order, please fill it out completely and make sure we have good contact information so we may reach you as quickly as possible.

- List the work you wish to have performed today.
- Park your vehicle in our lot and lock the doors.
- Place your keys and this form in an envelope.

SIGN BELOW WHERE INDICATED.

Drop the envelope and completed form through the slot.

Name _____

Address _____

City/State/ZIP _____

Email address: _____

Home () _____ - _____ Cell () _____ - _____ Work () _____ - _____

Best number to reach you at: HOME CELL WORK (Circle one)

Vehicle License Number _____ Color _____

Year _____ Make _____ Model _____

If possible please complete my vehicle by: Date _____ Time _____

ORIGINAL ESTIMATE AMOUNT AUTHORIZED \$ _____

PLEASE SPECIFY WORK TO BE PERFORMED

1. _____

2. _____

3. _____

4. _____

Do you want the old parts that are replaced? No Yes (Circle one)

I, the registered owner, authorize you to perform the above noted repairs and furnish necessary materials. I understand any cost quoted heretofore is an estimate only. Addison Auto Center (AAC) employees may operate my vehicle for inspection, testing and/or delivery at my risk. AAC will not be responsible for loss or damage to the vehicle or its content. An express mechanic's lien is acknowledged on the above vehicle to secure the amount of repairs thereto. In the event of failure to pay charges when due, I agree to pay any and all costs including reasonable attorneys fees related to the collection of the debt. I also agree to pay ten dollars (\$10.00) per day storage if I do not pay for AND pick up the vehicle within 3 days of notification of completion of the work. I understand because of using this after-hours service, I am not able to receive a copy of this estimate.

SIGN HERE > _____ (REQUIRED)