



Night Drop Form

Name:

First _____ Last _____

Address:

Street _____

City _____ State _____ Zip _____

Best contact number: (Please list if this number is home, work or cell) _____

Alternate number _____ Email _____

Vehicle description:

Year _____ Make _____ Model _____

Service Request and Symptoms:

Please follow these instructions

Print sign and date this form
Please park vehicle and lock
Place keys and form in the envelope (provided in the night drop box) and place through slot.
We will contact you to confirm your request.
We appreciate your business!

I hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle. In case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in part shipments by the supplier or transporter. I hereby grant you and your employee's 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 above vehicle to secure the amounts to repair thereto.

Customer's Signature _____ Date _____