

## After Hours Drop Off Form

Please complete this form, print it out and sign it, and place it and your car key in an envelope and drop it in our Night Drop Box. Thank you!

### Personal Information

Name: \_\_\_\_\_ \*

Address: \_\_\_\_\_ \*

City: \_\_\_\_\_ \* State: \_\_\_\_\_ \* Zip: \_\_\_\_\_ \*

Main Phone: \_\_\_\_\_ \* Secondary: \_\_\_\_\_ Cell: \_\_\_\_\_

What is the best time for us to contact you tomorrow, at what number?

\_\_\_\_\_ \*

### Vehicle Information

Year: \_\_\_\_\_ \* Make: \_\_\_\_\_ \* Model: \_\_\_\_\_ \*

Color: \_\_\_\_\_ \* Plate #: \_\_\_\_\_ \*

### Maintenance Service Requested (Check all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> State Inspection | <input type="checkbox"/> Tire Rotation | <input type="checkbox"/> Oil Change      |
| <input type="checkbox"/> Balance Tires    | <input type="checkbox"/> Brake Flush   | <input type="checkbox"/> Coolant Flush   |
| <input type="checkbox"/> Steering Flush   | <input type="checkbox"/> Trans Flush   | <input type="checkbox"/> Air Conditioner |
| <input type="checkbox"/> Wheel Alignment  | <input type="checkbox"/> Tire Repair   | <input type="checkbox"/> Other           |

If you checked "other", please explain.

### Authorization

I hereby authorize the above repair work to be done along with the necessary material. I hereby grant you and/or your employees permission to operate the car, truck, or 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 vehicle to secure the amount of repairs thereto:

Signature: \_\_\_\_\_ \* Date: \_\_\_\_\_ \*