

After Hours Drop-Off Form

INSTRUCTIONS WHEN FILLING THIS FORM:

1. Correctly fill the service requests on this form, sign and print.
2. Lock your vehicle, place the key in the Envelope (attached to the building) and seal.
3. Drop form and key in our mail slot in the first bay door closest to the showroom.

Thank You

Full Name *

First Name

Last Name

Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Home Phone Number

Cell Phone

E-mail

example@example.com

Vehicle Description

Year

Make

Model

License No.

Mileage

Color

Check/Repair the following:

Type of Service

- Oil and Filter
- Air Filter Change
- Courtesy Inspection
- Transmission Service
- Oil Leak
- Engine Tune-up
- Align Front End
- Balance Wheels
- Rotate Tires
- Other

Coolant Change

If Other, Please specify

Add Comments

Would you like you old parts back if applicable?

Yes

No

NOTE THAT WE ARE NOT RESPONSIBLE FOR ANY ITEMS LEFT IN THE VEHICLE

I hereby agree voluntarily to drop the key for my vehicle for servicing and acknowledge that any damage or wrong service given due to false information given above our company will not be responsible. I hereby declare that i have read all the instructions above and have filled out the night drop form as required.

Signature

Date

Note: The form must be signed before we begin working on your vehicle.