

Auto Select

TO OUR EARLY MORNING OR LATE EVENING SERVICE CUSTOMERS

1. WRITE YOUR ORDER ON THIS ENVELOPE.
2. LEAVE YOUR CAR ON OUR LOT AND LOCKED.
3. PLACE YOUR KEYS IN THIS ENVELOPE.
4. DROP ENVELOPE IN MAIL SLOT.

NAME	YEAR
ADDRESS	MAKE / MODEL
CITY	COLOR
STATE ZIP	LICENSE NO.
HOME PHONE	MILEAGE
BUSINESS PHONE	DAY / TIME YOU WILL CALL FOR YOUR CAR <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.

USE THIS HANDY CHECK LIST

- | | |
|--|---|
| <input type="checkbox"/> _____ MILE INSPECTION | <input type="checkbox"/> _____ MILE DIAGNOSIS |
| <input type="checkbox"/> Chassis Lubrication | <input type="checkbox"/> Replace Muffler |
| <input type="checkbox"/> Change Engine Oil | <input type="checkbox"/> Adjust Brakes |
| <input type="checkbox"/> Change Oil Filter | <input type="checkbox"/> Repair Lights |
| <input type="checkbox"/> Change Transmission Oil | <input type="checkbox"/> Oil Leaks - Front |
| <input type="checkbox"/> Repack Front Wheel Bearings | <input type="checkbox"/> Oil Leaks - Rear |
| <input type="checkbox"/> Tune Engine | <input type="checkbox"/> Replace Clutch |
| <input type="checkbox"/> Replace Brakes | <input type="checkbox"/> Body Damage |
| <input type="checkbox"/> Other Work (Details) | <input type="checkbox"/> Undercoat |

I hereby authorize the above repair work to be done along with the necessary materials, and hereby grant you and / or your employees 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 amount of repairs and / or service thereto. Our facility is not responsible for unavailability of parts or delays in parts shipments beyond our control nor for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond our control.

Please Sign Here _____