

**SIGNATURE REQUIRED AT BOTTOM OF FORM**



# Key Drop Envelope

1. Please write your service instructions on this envelope.
2. Lock your vehicle, place keys in this envelope and seal.
3. Sign at bottom and drop envelope in our mail slot.

*THANK YOU*

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Bus Phone \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

License No. \_\_\_\_\_ Mileage \_\_\_\_\_

Color \_\_\_\_\_

## CHECK / REPAIR THE FOLLOWING

- |   |   |
|---|---|
| <input type="checkbox"/> Lubrication Service  | <input type="checkbox"/> State Inspection |
| <input type="checkbox"/> Oil & Filter         | <input type="checkbox"/> Service Brakes   |
| <input type="checkbox"/> Air Cleaner          | <input type="checkbox"/> Align Front End  |
| <input type="checkbox"/> Transmission Service | <input type="checkbox"/> Balance Wheels   |
| <input type="checkbox"/> Oil Leaks            | <input type="checkbox"/> Rotate Tires     |
| <input type="checkbox"/> Engine Tune-Up       | <input type="checkbox"/> Service A/C      |

## COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you want your old parts? YES ☐ NO ☐

## NOT RESPONSIBLE FOR ANY PERSONAL ITEMS LEFT IN VEHICLE.

I hereby authorize the above repair work to be done along with the necessary materials. You and your employees may operate the above vehicle for the purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on the above vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, accident or any other cause beyond your control.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE: This form must be signed before we can begin work on your vehicle.**