

To Our After Hours Customers

- 1. Please write your service instructions on this envelope
- 2. Lock your vehicle, place keys in this envelope and seal.
 - 3. Place signed envelope in our after hours slot/box

☐ I have an appointment. My Service Advisor is		
Name		
Address		
City	State	Zip
Preferred Contact Method:	☐ Home Phone	
☐ Bus Phone	Cell Phone _	
License Plate Number	Mileage	
Year Make & M	odel	Color
VIN		
When would you like your vehicle to be ready?		
Use This Handy Check List		
☐ Lubrication Service	☐ Flush Cooling System	☐ Check AC/Heating Systems
☐ Front End Alignment	☐ Inspect Brakes	☐ Change Transmission Fluid
☐ Balance Wheels	☐ Tune Engine	☐ Check Steering and Shocks
☐ Front ☐ Rear	☐ Change Oil and Filter	☐ Mile Service
☐ Check & Rotate Tires	☐ Check Exhaust System	
Other Service Desired / Description	on of Problem:	
other cause beyond your control or for any delays caused by unavail	ilability of parts or delays in parts shipments by the supplier or transp	or loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any orter. I hereby grant you and/or your employees permission to operate the vehicle knowledged on above behicle to secure the amount of repairs thereto.
Customer Signature		Date: