

EXPRESS VEHICLE DROP OFF FORM

PERSONAL INFORMATION:

SERVICE DATE: _____

FULL NAME: _____ EMAIL ADDRESS: _____

ADDRESS: _____ POSTAL CODE: _____

HOME PHONE: _____ BEST WAY TO CONTACT YOU TODAY: _____

VEHICLE INFORMATION:

YEAR: _____ MODEL: _____ COLOUR: _____ LICENSE PLATE: _____

V.I.N: (Serial Number if available) _____ CURRENT ODOMETRE READING: _____

PLEASE CHECK ALL THAT APPLY:

- | | |
|---|---|
| <input type="checkbox"/> MAINTENANCE MINDER O, A: oil & filter change | <input type="checkbox"/> MAINTENANCE MINDER 9: four-wheel brake service |
| <input type="checkbox"/> MAINTENANCE MINDER B:
oil & filter change with four-wheel brake service | <input type="checkbox"/> PERFORM RECALL |
| <input type="checkbox"/> MAINTENANCE MINDER 1: tire rotation | <input type="checkbox"/> ALIGNMENT |
| <input type="checkbox"/> MAINTENANCE MINDER 2: air and pollen filters | <input type="checkbox"/> SEASONAL TIRE CHANGE |
| <input type="checkbox"/> MAINTENANCE MINDER 3: transmission fluid | <input type="checkbox"/> REPLACE WIPER INSERTS |
| <input type="checkbox"/> MAINTENANCE MINDER 4:
spark plugs or spark plugs with timing belt | <input type="checkbox"/> CHECK A/C SYSTEM |
| <input type="checkbox"/> MAINTENANCE MINDER 5: engine coolant | <input type="checkbox"/> REPLACE WIPER INSERTS |
| <input type="checkbox"/> MAINTENANCE MINDER 6: differential fluid | <input type="checkbox"/> CHECK EXHAUST |
| <input type="checkbox"/> MAINTENANCE MINDER 7: brake fluid | <input type="checkbox"/> CHECK BRAKES |
| | <input type="checkbox"/> WARNING LIGHTS ON (please specify)
_____ |

OTHER WORK: _____

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 highways or elsewhere for the purpose of testing and/or inspection. An expressed mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs hereto. Dealer not responsible for unavailability of parts or delays in parts shipments beyond dealer's control nor for loss or damage to vehicle or articles left in vehicle in cases of fire, theft or any other cause beyond our control. A written estimate will be provided at my request.

PLEASE SIGN X _____

Do you want the old parts: Yes NO

To be paid by: CASH CREDIT CARD DEBIT CARD E-PAYMENT