

AUTHORIZATION TO REPAIR

Auto Art Body Shop

2110 Thompson Lane

Murfreesboro, TN 37129

(P) 615-896-9420 – (F) 615-893-2491

Name _____ Date _____

Home Phone _____ Work Phone _____

Year _____ Make _____ Model _____

Insurance Co. _____ Adjuster _____

Phone _____ Claim No. _____

I hereby authorize repair of the above vehicle. I agree that Auto Art Body Shop is not responsible for loss of articles left in vehicle caused by fire, theft, or any other cause beyond our control or for delays caused by the unavailability of parts or shipping delays. I also grant permission to Auto Art Body Shop’s employees to operate the above stated vehicle for the purpose of testing and or inspection. I understand and agree that to secure payment for the repairs thereto, an expressed mechanic’s lien on the above vehicle is acknowledged and further agree to pay reasonable attorney’s fees and court costs in the event that legal action becomes necessary to enforce this contract.

Signature _____ Date _____

DIRECT PAY AUTHORIZATION

I hereby authorize payment to be made to Auto Art Body Shop for any repairs made to my vehicle.

Signature _____ Date _____