

BODY SHOP VEHICLE PRE-INSPECTION

DATE: _____

VEHICLE OWNER: _____

CLAIM #: _____

DRIVABLE YES ___ NO ___

YEAR/ MAKE/ MODEL: _____

VIN #: _____

COLOR: _____

LICENCE #: _____

MILES: _____



RELATED UNRELATED

RELATED UNRELATED

	RELATED	UNRELATED
FRT BUMPER	___	___
FRT LIGHTS	___	___
RT FENDER	___	___
LT FENDER	___	___
GRILLE	___	___
HOOD	___	___
WINDSHIELD	___	___
MIRRORS	___	___
RT FRT DOOR	___	___
RT REAR DOOR	___	___
LT FRT DOOR	___	___
LT REAR DOOR	___	___
RT QUARTER PANEL	___	___
LT QUARTER PANEL	___	___
TRUNK LID	___	___
TAILGATE	___	___
LIFTGATE	___	___
PICKUP BOX	___	___
REAR BUMPER	___	___
EXTERIOR PAINT	___	___
RT SIDE MOULDINGS	___	___
LT SIDE MOULDINGS	___	___

	RELATED	UNRELATED
ROOF	___	___
SEATS	___	___
DASH BOARD	___	___
TRIM PANELS	___	___
STEREO	___	___
WINDOWS	___	___
STEERING COLUMN	___	___
AIRBAGS	___	___
A/C	___	___
ENGINE	___	___
TRANSMISSION	___	___
SUSPENSION	___	___
BRAKES	___	___
EXHAUST SYSTEM	___	___
RT FRT WHEEL	___	___
RT REAR WHEEL	___	___
LT FRT WHEEL	___	___
LT REAR WHEEL	___	___
RT FRT TIRE	___	___
RT REAR TIRE	___	___
LT FRT TIRE	___	___
LT REAR TIRE	___	___

MR/MS CUSTOMER A THOROUGH RECORD HAS BEEN MADE OF THE LOSS RELATED/UNRELATED DAMAGES ON YOUR VEHICLE TO ASSURE YOU OF THE BEST POSSIBLE SERVICE/ SATISFACTION

CUSTOMER SIGNATURE: _____

DATE: _____

I _____ authorize Sterling Auto Service to do a complete tear down, estimate and repair my vehicle unless it is a total loss. A total loss occurs when the cost of repairing the vehicle meets or exceeds a percentage of the fair market value based upon the **NADA** used car guide; in which case the vehicle is consider a **“TOTAL LOSS”** pursuant applicable law.

Due to many unforeseen circumstances in the repairing of automobiles we regret that we can **ONLY ESTIMATE, NOT PROMISE** completion time. The shop will notify you if there are any delays in the repairing of your vehicle, due to parts or for any other reasons. When your vehicle is dropped off for repairs it will be inspected. Upon repair completion you will be notified by the shop.

STORAGE CHARGES: Storage charges begin 24 hours after repairs are completed at \$40.00 per day. Sterling Auto Service & Body Shop LLC will not be responsible for tickets or citations for expired registration, license plates and/or void invalid inspections stickers placed on costumer vehicles while in our possession. Costumer’s vehicles may be at times be parked on or test driven on city streets. In the event of fire, theft, or any other causes beyond our control the shop is not responsible for loss or damage to cars or articles left in cars.

I hereby authorized repairs and agree to pay for all repairs described in the **STERLING AUTO SERVICE** Estimate and any supplement or adjustment to the original estimate prepared for me and/or the insurance company by Sterling Auto Services & Body Shop LLC. I hereby grant you and/or your employee’s permission to operate my vehicle on the street, highways, or elsewhere for the purpose of testing and/or inspection. The repair Shop is authorized to sub-contract certain repairs as deemed necessary during the course of repairs. An express mechanic lien is hereby acknowledged on the vehicle to secure the amount of repairs thereto. **NO CAR RELEASED UNTIL PAYMENT IS MADE IN FULL** or appropriate arrangements are made with us. Deductible or insurance check or proof of loss must be received before vehicle is released. I hereby authorize the insurance company to make payments directly to Sterling Auto Services & Body Shop LLC, on behalf for damages arising from my claim. I hereby appoint Sterling Auto Service & Body Shop LLC as my attorney in fact to accept any and all claims, drafts, or bills of exchange to deposit to the aforementioned business account for credit on my account for repairs on my vehicle.

Your deductible is to be paid in full when you pick up the vehicle. If you have an issue concerning your deductible, whether it’s waived or deducted, please contact your insurance agent as soon as possible. We will need a fax from them with the company letterhead, a signature, name of agent and a telephone number where they can be reached.

I have read and understood all the disclaimers stated on this form.

CUSTOMER

DATE

WE DO NOT ACCEPT PERSONAL CHECKS - We Accept Approved Insurance Checks, Cash, Certified Funds, VISA, MASTER CARD, DISCOVER ONLY.

Claimants must present insurance checks and estimate when car is dropped off for repair and before repairs can begin. Please be certain all payees (including all lien holders) have endorsed the insurance check prior to delivery. At the option of the repair facility, storage may be charged 24 hours after repairs have been completed.

We are unable to guarantee a completion date or time due to the complex nature of the repair process. We do not guarantee a perfect color match.

Thank you for your support and confidence.

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I hereby authorized repairs and agree to pay for all repairs described in the **STERLING estimate** and any supplement or adjustment to the original estimate prepared for me and/or the insurance company by Sterling Auto Services & Body Shop LLC. I hereby grant you and/or your employees' permission to operate my vehicle on the street, highways, or elsewhere for the purpose of testing and/or inspection. The repair Shop is authorized to sub-contract certain repairs as deemed necessary during the course of repairs. An express mechanic lien is hereby acknowledged on the vehicle to secure the amount of repairs thereto. **NO CAR IS RELEASED UNTIL PAYMENT IS MADE IN FULL** or appropriate arrangements are made with us. Deductible or insurance check or proof of loss must be received before vehicle is released. I hereby authorize the insurance company to make payments directly to Sterling Auto Services & Body Shop LLC, on behalf for damages arising from my claim. I hereby appoint Sterling Auto Service & Body Shop LLC as my attorney in fact to accept any and all claims, drafts, or bills of exchange to deposit to the aforementioned business account for credit on my account for repairs on my vehicle.

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I have read and understood all the disclaimers stated on this form.

Signature _____ Date: _____

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Please be certain all payees (including all lien holders) have endorsed the insurance check prior to delivery. At the option of the repair facility, storage may be charged 24 hours after repairs have been completed.

I have received a copy of the initial and final automated repair estimate.

I authorize State Farm® to pay Sterling Auto Service & Body Shop \$ _____ on my behalf.

Signature _____ Date _____

I certify that repairs have been completed as indicated on the final automate repair estimate.

Repairer's Signature _____ **Date** _____