

NAME		DATE		
ADDRESS				
PRIMARY PHONE		OTHER		
EMAIL				
YEAR	MAKE	MODE		
INSURANCE CO		ADJUSTER	ADJUSTER	
INSURANCE PHONE		CLAIM NO	CLAIM NO	
AUTHORIZATION TO REPAIR				
I hereby authorize repair of above vehicle. I agree that Yimmy's 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 Yimmy's Body Shop employees to operate the above stated vehicle for the purpose of testing and inspection. I understand and agree that to secure payment for the repairs thereto, and expressed mechanic's lien on the above vehicle is acknowledged and further agrees to pay reasonable attorney's tees and court costs in the event that legal action becomes necessary to entorce this contract.				
SIGNATURE		DATE		
DIRECT PAY AUTHORIZATION				
I hereby authorize payment to be made to Yimmy's Body Shop, for any and all repairs made to my vehicle.				
SIGNATURE		DATE		