



Service Drop-Off Form

For your convenience and safety, you may print this form and fill it out at home. Simply bring it with you when you drop your vehicle off for service. There are envelopes located just outside of our office entrance. Place the completed service request, **along with your keys**, in the envelope and slip it through the black letter slot in our **front office door**. We'll call you as soon as we check your car with a complete estimate. It's that easy!

Name _____ License Plate # _____

Address _____

City _____ Zip _____

Home Phone _____ Daytime Phone _____

If you prefer to call us for an estimate, what time will you call? _____

Year of Vehicle _____ Make and Model _____ Color _____

USE THIS HANDY CHECKLIST

- | | |
|--|---|
| <input type="checkbox"/> Oil and Filter Change | <input type="checkbox"/> Rough Running Engine |
| <input type="checkbox"/> 30/60/90K Scheduled Service | <input type="checkbox"/> Timing Belt Replacement |
| <input type="checkbox"/> Tune Up | <input type="checkbox"/> Overheating |
| <input type="checkbox"/> Brake Inspection | <input type="checkbox"/> Service Engine Light On |
| <input type="checkbox"/> Cooling System Service | <input type="checkbox"/> Muffler or Exhaust |
| <input type="checkbox"/> Replace Wiper Blades | <input type="checkbox"/> Air Conditioning |
| <input type="checkbox"/> Service Transmission | <input type="checkbox"/> Will Not Start -Towed In |
| <input type="checkbox"/> Difficulty Starting | <input type="checkbox"/> Clutch or Transmission |

Other Work Requested (please explain): _____

I hereby grant Morgan Motors and its employees to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing or inspection. Morgan Motors not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond our control. I authorize up to one hour of diagnosis to be billed to properly provide me with an estimate of repairs. Morgan Motors will not perform repairs to my vehicle until I have provided authorization of any amount over \$100.00.

Please Sign _____

YOU WILL BE CALLED AND GIVEN AN ESTIMATE FOR THE REPAIRS YOUR VEHICLE NEEDS BEFORE ANY WORK IS PERFORMED, UNLESS OTHERWISE ARRANGED.

Would you like us to save your old parts? Yes No