Vehicle Repair Authorization

EXOTICAR PAINTWORKS INC. | Address: _____ | Phone: _____

CUSTOMER AND VEHICLE

Owner name: _____ Phone: _____

Email: _____ Claim number: _____

Year / make / model: _____ VIN: _____

License plate: _____ Loss date: _____

Insurer: _____ Estimate / work order no.: _____

AUTHORIZATION AND PAYMENT

I authorize Exoticar Paintworks Inc. to perform the repairs described in the written estimate or work order identified above, including necessary disassembly, testing, and road testing. The shop will seek my approval for additional work or charges when required by Florida law. A separate estimate and any required estimate election must be provided before work begins.

I remain responsible for my deductible, noncovered charges, and approved differences between the insurer payment and the shop invoice. Insurance coverage or a claim payment does not by itself change my payment obligation. Payment is due before vehicle release, subject to applicable law.

Optional insurance payment direction (initial to authorize): _____ I authorize the insurer to pay Exoticar Paintworks Inc. directly for approved repairs. Any endorsement of a check payable to me requires my separate signature or written authority; this form does not grant a power of attorney.

VEHICLE AND PERSONAL PROPERTY

I will remove valuables and personal items before leaving the vehicle. I authorize shop personnel to move or operate the vehicle as reasonably needed for repair, inspection, calibration, testing, and delivery. The shop remains responsible as required by applicable law; this form does not waive claims for its negligence.

STORAGE AND TOTAL LOSS

Storage after repair completion: $150 per day, beginning only after the shop notifies me that repairs are complete and the three working day period required by Florida law has passed. Any pre-repair, total loss, or other storage and administrative charges must be separately disclosed and authorized on the estimate or another signed document.

If the vehicle is declared a total loss, I owe approved work and disclosed charges actually incurred. Any proposed administrative fee, including a fee calculated as a percentage of an estimate, requires a separately stated amount or calculation and my express approval before it is charged.

PAYMENT METHODS AND ACKNOWLEDGMENTS

The shop states that it does not accept credit or debit cards. It accepts insurance checks, and personal or travelers checks up to $1,000 with proper identification. Confirm any other accepted method with the shop before pickup.

I received or was offered a copy of this authorization and understand that the written estimate, any supplement approvals, and final invoice document the repair scope and charges.

OPTIONAL PHOTO AND SOCIAL MEDIA PERMISSION

Initial only if you agree: _____ I allow Exoticar Paintworks Inc. to photograph or record my vehicle and its repair work and use those images on its website and social media for marketing. The shop will hide my license plate, VIN, claim number, personal items, and any people in the images, and will not use my name without separate permission. I may withdraw permission for future posts by contacting the shop; existing posts may remain. Leaving this blank does not affect my repair.

Owner / authorized person signature: _____ **Date:** _____

Printed name: _____ Relationship to owner: _____