

CUSTOMER NAME:

PO#

ESTIMATE OF REPAIR:

VEHICLE TYPE:

I authorize for Prineville Body & Paint to repair my vehicle, as per the estimate that they provided for me. I also understand that during the process, Prineville Body & Paint may find some "hidden" or "additional" damage, pertaining to the accident, that will need to be taken care of. I give authorization for Prineville Body & Paint to repair this damage and supplement it to the insurance company. I also understand that in the event that I have a deductible, I am to pay \$_____ to Prineville Body & Paint when repairs are complete, before my vehicle is returned to me. I understand that Prineville Body & Paint can choose to hold my vehicle until my deductible is paid in full, with the possibility of storage charges.

I authorize for the insurance company to pay Prineville Body & Paint directly. I do hereby consent for Prineville Body & Paint to accept on my behalf any and all such checks, supplements, drafts, or bills of exchange. I do hereby consent for Prineville Body & Paint to endorse all such checks, supplements, drafts, or bills of exchange for deposit to the aforementioned business account for credit on my account for repairs of my vehicle which has been released and accepted.

Prineville Body & Paint is not responsible for the items left in vehicle during the time of repairs.

ACCEPTED BY:_____ **DATE**_____

Preferred method of contact:

Text:_____ **email:**_____

phone:_____