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 Pompano Beach, FL 33064
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A/B Lic. 191
 MV Lic. MV01961

Customer Information (Please Print)

Date: _____ Full Name: _____ Cell Phone: _____
 Address: _____ Apt or Suite _____ Work Phone: _____
 City: _____ State: _____ Zip: _____ Home Phone: _____
 E-Mail: _____ Fax: _____
 Year: _____ Make: _____ Model: _____ Color: _____
 Insurance Co: _____ or Self Pay: _____ Claim #: _____
 How did you select our company? _____

Estimate Cost of Repair \$ _____		Revised Estimate \$ _____	
Save Replaced Parts <input type="checkbox"/> Yes <input type="checkbox"/> No	Car Test Driven <input type="checkbox"/> Yes <input type="checkbox"/> No Miles _____	Rate Customer Charged <input type="checkbox"/> Per hr. \$ _____ hr.	
Daily Storage Charge \$ _____ Day _____	Payment <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AM.EX <input type="checkbox"/> Cash <input type="checkbox"/> Other _____		
Guaranteed on work Parts <input type="checkbox"/> Yes <input type="checkbox"/> No	Time _____ Miles _____	Labor <input type="checkbox"/> Yes <input type="checkbox"/> No	Time _____ Miles _____
Additional Repairs Authorization other person who may Authorize repairs Phone _____ Date _____ Time _____ Amount _____ Received By _____ From: <input type="checkbox"/> Customer <input type="checkbox"/> Authorized Person			
I Waive Pre-assemble or My Vehicle Signed _____ Date _____			
* I have received a copy of The Estimate and Disclosure Signed _____ Date _____			

PLEASE READ CAREFULLY, CHECK ONE THE STATEMENTS BELOW AND SIGN.
I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, IF MY FINAL BILL WILL EXCEED \$100.

I REQUEST A WRITTEN ESTIMATE.
 I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$ _____
THE SHOP MAY NOT EXCEED THIS AMOUNT WITH OUT MY WRITTEN OR ORAL APPROVAL.
 I DO NOT REQUEST A WRITTEN ESTIMATE.

*SIGNED: _____ DATE: _____
NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

Vehicle Repair Agreement and Authorization

I hereby authorize the required work to be completed to my vehicle, By 1st Class, along with the necessary materials. If any additional damage is discovered, the party responsible for the payment will be notified of the additional charges. I hereby grant 1st Class and its employees permission to operate the vehicle described, on the street, highway, or elsewhere for the purpose of testing and inspection. An express mechanics lien is hereby acknowledged on the above vehicle to secure the amount of the repairs charged. I understand that storage charges, will apply 72 hours after notification of completion of your vehicle. If I cancel repairs to my vehicle for any reason, I understand that teardown and reassembly fees will apply per the hourly rate. I understand that 1st Class's final invoice for repairs of my vehicle may not match that of the insurance company's (Informational Purposes Only) estimate as to parts, labor or procedures used to repair my vehicle. Since vehicle technology evolves at a rapid pace, I understand that repair techniques employed are based upon 1st Class's professional decisions, as to the best means of effecting a high quality repair. Vehicles towed or driven in, then deemed a total loss, or moved to another facility for any reason by the customer or insurance company, may be subject to storage, administrative, lot, debris cleanup charges or estimate fees. Any labor, towing or lift inspection fees must be paid before vehicle leaves 1st Class. These charges are over and above the value of the vehicle. Prior written notice must be given if return of used or damaged parts is desired by the customer. I, the customer, will be responsible for loss or damage to my vehicle from fire, theft and accidents. Furthermore, I, the customer, will be responsible for any personal items left in the vehicle (or any loss caused beyond our control). I, the customer, represent and agree to remove all personal articles from my vehicle, as it may be necessary to move them during the repair process.

Direction of payment. I authorize any/all supplements payable to 1st Class. **Federal Tax ID 65-0515741** I do hereby appoint 1st Class to act as Power of Attorney on this claim. In fact to accept, on behalf, any and all checks, drafts, or bills of exchange, and to endorse all such, drafts, bills of exchange for deposit to 1st Class account for credit on my account for credit on my account for repairs to my vehicle.

Customer Signature _____ Date _____ Claim# _____

**1st Class
Vehicle Repair Agreement and Authorization Policies**

PLEASE READ FREQUENTLY ASKED QUESTIONS

METHODS OF PAYMENTS WE ACCEPT

We accept: Insurance Check`s, Wire Transfer, Cashier`s Check, Personal Check and Credit Cards up to \$1,000.00, credit card charges over this amount will incur a 3% additional fee.

WHO DO I PAY MY DEDUCTIBLE -CO-PAY TO

Deductible Co Pay is the customer`s responsibility, and the customer must make the payment directly to 1st Class.

PAYMENT RESPONSIBILITY

The customer is responsible for all payments. 1st Class will help you collect these from the insurance company, but you will be involved in contacting the insurance company directly, to make sure that the payment is issued. No vehicle will be released until payment is made in full.

WHEN WILL MY VEHICLE BE READY

We are unable to guarantee a completion date, due to the complex nature of the repair process. We will do our best to prevent delays in the repair of your vehicle, however, it is important to understand that parts and insurance delays are sometimes beyond our control, and we cannot be responsible for them. We will do our best to keep you informed at the frequency you desire.

WILL AFTERMARKET PARTS BE USED TO REPAIR MY VEHICLE

1st Class does not endorse the use of aftermarket parts. The customer may pay the difference for the OEM parts instead. Your insurance policy may require the use of these type of parts. Please check with your insurance company or agent. **Parts Act Florida Aftermarket Crash Part III, Chapter 501:**

INSURANCE AGREEMENT ISSUES THAT MAY ARISE ON THE REPAIRS

We are able to work with most Insurance companies. Some insurance company employees may go out of their way to persuade the customer to take their vehicle to their preferred shop, by saying they will not approve our repair methods or rates. You may need to assist us by calling your carrier to inform them of the issues that may come up. Please be advised that we will keep you informed of all situations that may arise. You may be asked to sign the Assignment of Benefits on this claim if shortages exist from the insurance company, or be asked to pay the difference. Please ask your service writer for more information on this.

WHAT IF I HAVE CONCERN AFTER THE REPAIR CALL US AT 954-785-3784

PLEASE CALL OUR OFFICE ASAP, SO WE CAN DISCUSS AND ADDRESS YOUR CONCERN THAT MAY ARISE FROM THIS REPAIR.

WILL I RECEIVE CSI SURVEY

Yes. 1st Class wants your feedback, on how we performed. Please take a moment to complete this survey.

WARRANTY

Work performed has a limited warranty, to the original vehicle owner. Parts manufactures will have their own warranty. 1st Class must be notified first, of any claims that may arise, in writing, or the claim can be denied by 1st Class. Items that are not covered are damages that are acquired from driving conditions, improperly cleaning, environmental pollution damage, aftermarket parts (including fit & paint) supplied/requested by customer, prior repairs and R&I of aged parts. All rust repairs have no warranty. Since, this is a repair, defects may exist. No verbal claims shall be binding.

TOTAL LOSS CHARGES

Insurance companies CANNOT deduct the total loss charges from the settlement, for the actual cash value of the vehicle. These charges are over and above the value of the vehicle.

Customer Signature _____ Date _____