



**234 E JOHNSON ST  
CARY, NC 27513  
919-380-0040**

Monday-Friday 7am-6pm

**TO OUR EARLY MORNING & LATE EVENING CLIENTS**

1. COMPLETE & SIGN THIS ENVELOPE.
2. PLACE YOUR KEYS IN THIS ENVELOPE.
3. LEAVE YOUR LOCKED CAR ON OUR LOT.
4. DROP ENVELOPE IN SLOT AT SERVICE BAY DOOR ON THE LEFT.

DATE ____ / ____ / ____		NAME _____	
ADDRESS _____			
CITY _____			ZIP _____
TODAY'S PHONE # (____) _____		SECONDARY # (____) _____	
EMAIL _____			@ _____
DESIRED PICK-UP TIME _____			
CAR MAKE / MODEL _____			
YEAR _____	COLOR _____	LICENSE PLATE _____	

**USE THIS HANDY CHECKLIST:**

- |   |  |
|---|--|
| <input type="checkbox"/> OIL FILTER LUBE                  | <input type="checkbox"/> TIRE ROTATION                       |
| <input type="checkbox"/> INSPECT BRAKES                   | <input type="checkbox"/> ALIGN / INSPECT SUSPENSION          |
| <input type="checkbox"/> REPLACE WIPER BLADES             | <input type="checkbox"/> BALANCE TIRES                       |
| <input type="checkbox"/> HEADLIGHT RESTORATION            | <input type="checkbox"/> INSPECT HEAT / AIR CONDITIONING     |
| <input type="checkbox"/> INSPECT WARNING LIGHT(S)         | <input type="checkbox"/> TEST BATTERY. CHARGE & START SYSTEM |
| <input type="checkbox"/> MAINTENANCE INTERVAL / "TUNE-UP" | <input type="checkbox"/> NC STATE INSPECTION                 |

**OTHER SERVICE DESIRED / DESCRIPTION OF PROBLEM:**

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**THERE WILL BE A CHARGE TO DETERMINE WHAT IS WRONG WITH YOUR VEHICLE. THANK YOU.**

I hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

Under North Carolina law, you have the right to obtain a written repair estimate when the cost of repairs, including diagnostic work, is expected to exceed \$350. You also have the right to have replaced parts saved for inspection or returned and to be told of the daily charge for storing your car after we notify you the repairs have been completed. **Cary Car Care's long-standing policy has been to allow customers to inspect replaced parts or return them when requested. We do not charge for storage [of less than 10 days.]**

You may waive your right to receive a written repair estimate by signing below and indicating how long the waiver will be effective. You may revoke the waiver at any time and receive an estimate for any repair you ask us to make.

*I hereby waive my right to receive a written estimate on any vehicle I present for repair until* \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

- |   |  |
|---|--|
| <input type="checkbox"/> RETAIN OLD PARTS | <input type="checkbox"/> DISCARD OLD PARTS |
|---|--|

**SIGNATURE REQUIRED** \_\_\_\_\_ **DATE** \_\_\_\_ / \_\_\_\_ / \_\_\_\_