

TONY'S PAINT & BODY SHOP, INC.

1487 NC 55 West, Coats, NC 27521 – Phone# (910)897-5087 – Email: tonysbodync@yahoo.com

Authorization to Repair & Direction to Pay – Power of Attorney

Vehicle Owner / Lessee's Name: _____

Address: _____ Phone#: _____

Vehicle Year: _____ Make: _____ Model: _____ Color: _____

VIN# _____

Insurance Company: _____ Claim# _____

Deductible Amount: _____ **SELF PAY REPAIR** _____

I authorize Tony's Paint & Body Shop, Inc. to begin repairs on my vehicle, unless it is deemed a total loss. I authorize you & your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing/transporting/inspecting. I agree you are not responsible for loss or damage of vehicle or articles left in my vehicle in case of fire, theft or any other cause beyond your control.

– Initials _____

Power of Attorney: I hereby appoint Tony's Paint & Body Shop, Inc. of 1487 NC 55 West, Coats, NC 27521 as my attorney in fact to accept on my behalf any & all checks. I also authorize the endorsement all such checks for deposit to Tony's Paint & Body Shop, Inc.'s business account for credit on my account for repairs to my vehicle which has been released and accepted. Full payment is due, including my deductible (if applicable) when vehicle repairs are completed. Should the insurance company noted above not cover repairs, I then become solely responsible for payment in full.

SELF PAY REPAIR CUSTOMERS: I am solely responsible for payment of all repairs completed by Tony's Paint & Body Shop, Inc.

Vehicle Owner / Lessee's Name: _____ Date: _____

In the event the insurance company inadvertently mails the supplement check to me in error, I hereby agree to notify the said shop immediately. I agree to deliver such check to the repair facility within 24 hours of my receipt of such check.

Vehicle Owner / Lessee's Name: _____ Date: _____

DELIVERY DATES ARE "ESTIMATED" DATES OF COMPLETION AND ARE NOT GUARANTEED