



2621 E. Kalamazoo Street  
Lansing, MI 48912  
Phone: (517) 484S 3111  
Email: contact@universityforeigncar.com  
Registration: F132317

**CUSTOMER INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**VEHICLE INFORMATION**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Description of problem:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_ authorize University Foreign Car to diagnose/repair my vehicle described above for the amount of no less than \$105

Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

*\*(Type in Full Name to represent signature when filling this form online)*

**VEHICLES SERVICED MUST BE PAID IN FULL AND REMOVED FROM PREMISES 3 DAYS AFTER NOTIFICATION OF COMPLETED REPAIRS. A \$20.00 PER DAY STORAGE FEE WILL BE CHARGED TO OWNERS OF VEHICLES STARTING ON 4<sup>TH</sup> DAY AND THERE ON**