

AUTO / PACT / CRTN Repair Order

Qty	Description	Price	Amount	Nashua Community College 505 Amherst Street Nashua NH 03063	Date		
				Student's Name:			
				Customer's Name:	Phone:		
				Year:	Make/Model		
				Engine:			
				VIN:	Trans:		
				Work being performed	Amount		
				Concern:			
				Cause:			
				Correction:			
				Subject to terms and conditions as required by law.	Total Parts		
Total parts					Total Labor		
The warranties as applicable for the parts will be as provided by the manufacturer. The company's liability will be limited to what is expressly required by the applicable laws and will not extend beyond.				I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your students permission to operate the vehicle described for testing and/or inspection. Express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. SMOG: I understand that I can have emission service and/or adjustments done elsewhere. I hereby waive this right. TEARDOWN ESTIMATE: I understand that my vehicle will be reassembled within <u> 10 </u> days of the date shown above if I choose not to authorize the service recommended. All Parts removed will be discarded unless instructed otherwise: Save all Parts <u> </u> . NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE. Signature: _____			
						Other Charges	
						Tax	
				Total			