HAZELWOOD BODY & FENDER, INC.

Rosedale, MD.

PARTS ORDER AUTHORIZATION

| Date | Insurance Company: | | Claim #: | |
|---------------------------|---|---|--|--|
| Name | e: | | RO #: | |
| Year | : Make: | Model: | License: | |
| • | I hereby authorize Hazelwood Body & Fender to order parts for the vehicle listed above. I acknowledge I have received a written estimate. | | | |
| • | Owner-pay jobs require a 50% deposit for any parts listed on the estimate. Parts will not be ordered until the deposit is paid in full. | | | |
| • | Signing an Authorization to repair and/or scheduling a date for repair also authorizes parts to be ordered for my vehicle. | | | |
| • | Once parts are ordered, I understand I am responsible for the payment of any parts ordered. | | | |
| • | | for any reasons, the repairs are canceled and parts <i>can</i> be returned, I understand that I will be charged a 20% stocking fee plus any additional freight charges that may apply. | | |
| • | Fender is <i>not</i> able to return ther | ot all vendors allow us to return parts (no matter the circumstance). If parts are ordered and Hazelwood Body & ender is <i>not</i> able to return them, I understand I will be responsible for the payment of these parts in full and will be equired to pick the parts up within 10 days. | | |
| • | Part prices and freight charges and therefore may be reflected | - | endor. These charges are on a case by case basis | |
| By r | my signature I acknowledge that | I have read and agree to the ten | ms & conditions stated herein: | |
| Customer Signature: Date: | | | | |

_____ Date: ____

Hazelwood Body & Fender Representative: _____