

Woodys Auto Parts Inc.
92 Woody Ln
Ellenville, NY 12428
woodysautoparts@gmail.com

Facility# 7105554
Tax ID# 113837870
845-647-8175

Work Authorization and Direction to pay

Name: -----

Address:-----

Home Phone # -----Business/Cell#-----

-Year: -----Make: -----Model: ----- License Plate #-----
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I hereby authorize Woodys Auto Parts Inc (WAP Inc) the repair work to be done along with the necessary material, and hereby grant you/your employee's permission to operate the vehicle herein described on streets, highways, and elsewhere for purpose of testing and inspecting. An express mechanics lien hereby acknowledged on the above vehicle to secure the amount of repairs thereto. WAP Inc. is not responsible for the availability of parts for delays in part shipments. Nor for the loss of articles left in the vehicle in case of fire, theft, or any cause beyond our control.

I do hereby appoint the aforementioned business to accept on my behalf any, and all checks, drafts, or bills of exchange, and endorse all such for deposit to the aforementioned business account for credit on my account for repairs on my vehicle which has been released, and or accepted.

I authorized: ----- Insurance Company to pay WAP Inc. Directly
on clam #-----

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

Customer Signature:-----

Customer Name (printed): -----Date: -----