

Information, Repair Authorization, Direction To Pay

Name / Payer / Register owner / Agent _____ Date _____

Address _____ City _____ ST _____ Zip _____

Phone _____ EMAIL _____

Insurance Co _____ Deductible\$ _____ Claim# _____

Adjuster Name _____ Adjuster Phone _____

What is your Primary Concern ? _____ How did you hear about us ? _____

The most thorough repair possible **The most cost effective repair possible**

This Authorization To Repair, and Direction to Pay constitutes a contract between Body Works Plus, LLC (hereinafter “BWP”) and the undersigned to make the repairs, perform the work and supply the parts and materials to the vehicle identified above and in accordance with the provisions stated herein. I represent that I have the authority to authorize the repairs to the subject vehicle either as an owner or authorized agent of the owner. In connection with this Authorization, BWP and I agree as applicable as follows:

- a) BWP and I will assist each other in processing and transmitting documents reasonably required by any applicable insurance carrier to secure approval of the repair estimate and supplements, if any, and payment to BWP of the final repair cost.
- b) I authorize BWP to deal with the insurance carrier (s) directly to the extent necessary to secure authorization, make repairs on the original estimate and any applicable supplement and to secure payment for the same in a prompt manner.
- c) **I understand that BWP has no relationship with the involved insurance carrier (s) responsible for payment, if any, for the repair work, and that I, as owner or as agent for the owner, am ultimately responsible for payment in full in the event there is no insurance coverage or to the extent the insurance carrier (s) does not pay BWP in full for any reason.**
- d) I understand that the parts to repair the vehicle will be ordered upon completion of the Repair Plan and that by signing this Authorization, I will be obligated to pay BWP's standard retail price for the parts and that I will pay in addition all other BWP's standard charges including, but not limited to, disassembly, damage analysis, storage, stall usage, estimate fee, diagnostics, repairs commenced but not completed and administrative charges, if any.
- e) **If an applicable insurance carrier does not authorize payment for any work or cost for parts, or other item on any estimate or supplemental estimate, or repair bill, BWP will, at your request, perform such additional work and use such additional or other parts you authorize (i.e. OEM in lieu of Aftermarket or LKQ) and you agree to pay for the same.**
- f) **I understand that BWP prefers to use only new OEM parts and in the event the insurance company will not cover those costs: Yes, I agree to pay the differences _____ (initial) or No, I do not want to cover these costs _____ (initial). By choosing No you understand that some manufacturer's warranties may be void. BWP's warranty only applies to repairs completed using New OEM parts. If alternative parts are used in the repair, the owner and or the insurer accepts all liability and any implied warranty. BWP is indemnified and held harmless against any and all losses, claims, lawsuits, personal injuries, damages, cost, and expenses, including attorney fees.**
- g) I understand and agree that all charges, including the deductible, must be paid in full before the vehicle can be released, and that securing payment from an insurance carrier is my responsibility. I further understand that failure to take possession of the vehicle within 72 hours of completion for the work may result in additional charges for storage and interest for which I will be responsible and agree to pay, and an express mechanic's lien is hereby acknowledged on vehicle to secure the amount of repairs thereto.
- h) I understand that in the event the vehicle is not repaired, for any reason, I will pay all BWP's standard charges including, but not limited to, disassembly, damage analysis, storage, stall usage, estimate fee, diagnostics, repairs commenced but not completed and administrative charges, if any.
- i) **I understand that BWP does not provide rental vehicles, and is not responsible for any rental vehicle charges, even if the time to repair my vehicle exceeds the number of days allocated by the insurance carrier(s), or any other party, for rental vehicle coverage.**
- j) I understand and agree that BWP assumes no responsibility for any damage to the subject vehicle or its contents beyond our reasonable control, including but not limited to, loss by fire, theft, vandalism or act of God.
- k) I understand and agree that BWP is not responsible for delays caused by unavailability of parts or shipments of parts, Insurance carrier (s) estimate or supplemental estimate approvals, or other delays beyond BWP's control.
- l) I understand that estimates or charges for parts, sublet work, paint and materials, are not fixed and are subject to change. In the event the estimated cost of such items does change, the final bill will be adjusted accordingly.
- m) I hereby grant you, your employees and agents, permission to operate this vehicle on public roads for testing purposes.
- n) I understand that all applicable charges are due and payables as set forth above. In the event any such charges are not paid when due, interest will begin to accrue at the rate of eight per cent (8.00%) until all such sums are paid and that if it becomes necessary for BWP to employ legal counsel to effect collection of any past due amount, I agree to pay all collection costs including reasonable attorney fees and court costs.
- o) I authorize the Payer of this claim to pay Body Works Plus, LLC. direct for the necessary repairs to my vehicle. I authorize BWP to endorse and or deposit payments on my behalf.

I have read, understand and agree with the terms of this Authorization to Repair, and Direction to Pay:

Date _____ Signature of Registered owner/Payer/Agent _____