



**TO OUR EARLY BIRD / NIGHT OWL CUSTOMERS**

1. WRITE YOUR ORDER ON THIS FORM
2. LEAVE YOUR VEHICLE ON OUR LOT – LOCKED
3. PLACE FORM AND KEYS IN NIGHT DROP

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CUSTOMER NAME \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Email Address \_\_\_\_\_

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YEAR \_\_\_\_\_

MAKE \_\_\_\_\_

MODEL \_\_\_\_\_

COLOR \_\_\_\_\_



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- |  |  |
|--|--|
| <input type="checkbox"/> Change Oil and Filter | <input type="checkbox"/> Check Engine Light on |
| <input type="checkbox"/> Tire Rotation         | <input type="checkbox"/> Engine Running Poorly |
| <input type="checkbox"/> Transmission Service  | <input type="checkbox"/> Low Fuel Mileage      |
| <input type="checkbox"/> Brake Inspection      | <input type="checkbox"/> Vibration or Noise    |
| <input type="checkbox"/> Inspect Tires         | <input type="checkbox"/> _____ Mile Service    |
| <input type="checkbox"/> Pre-Trip Inspection   | <input type="checkbox"/> Replace Wipers        |

**Other Services Needed / Description of Problem**

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