CALIBER COLLISION

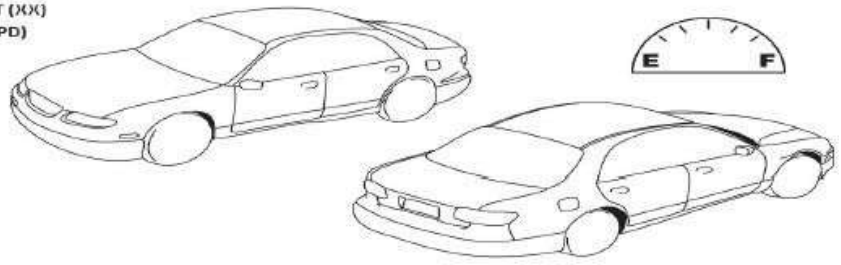
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RESTORING THE RHYTHM OF YOUR LIFE®

VEHICLE CHECK-IN AND AUTHORIZATION FORM

Name:_____ **RO#**_____

POINT OF IMPACT (XX)
PRIOR DAMAGE (PD)
OTHER DAMAGE
Light/Bulbs
Windows
Dash Lights
A/C
Emblems
Wheels/Hubcaps
Other



Interior Condition: Mileage In: Deductible: Inspected By:

AUTHORIZATION TO REPAIR – I hereby authorize Caliber Collision to complete the necessary repairs to my vehicle. A Service Advisor will provide me with an oral/written evaluation. I understand that payment in full will be due upon release of the vehicle, including any supplement charges. I hereby grant you and/or your employees' permission to operate my vehicle on streets, highways, or elsewhere for the purpose of testing, inspecting or sublet repairs, and delivery or pick up. Caliber will defend you as to any third-party claims made and related to Caliber's operation of the vehicle. An Express Mechanic's Lien is hereby acknowledged on the above vehicle to secure the amount of repairs thereto. I will not hold Caliber responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, accident, or any other cause beyond your control.

AUTHORIZATION TO DISASSEMBLE – I authorize Caliber Collision to disassemble my vehicle for the purpose of diagnosing repairs and preparing a full estimate of the cost of repair. I understand that if I choose not to complete repairs, I may be charged for disassembly, reassembly and/or partially completed work, based on Caliber's normal hourly labor rate.

POWER OF ATTORNEY – For insurance claims, I hereby appoint Caliber Collision and its authorized employees to be my attorney-in-fact with the limited authority to sign my name on any check or draft covering repairs to my vehicle and to take such action as may be necessary to negotiate any such check or draft.

AUTHORIZATION TO ACCESS VEHICLE DATA – I understand that modern vehicles are complex, and that electronic data recorded in vehicle systems may help to diagnose necessary repairs and to confirm that applicable systems are functional after repairs are performed. I authorize Caliber to access this data as part of the repair process and to include this data in compilations that may be used to study the causes of accidents or to achieve improvements in repair processes.

TRANSFER OF VEHICLE – To speed up repair times and take advantage of special expertise across our centers, Caliber will periodically transfer vehicles from one center to another. Please check the "No" box below and initial if you do not wish to take advantage of these Caliber multi-location benefits.

☐ **NO** _____Customer Initials

DIRECTION TO PAY – If an insurance carrier is paying for all or part of my repair order, I authorize payment to Caliber Collision Centers, or its affiliated companies. If a deductible is required, I will be responsible for payment. Furthermore, I authorize all supplement repair order amounts to be paid to Caliber Collision.

COMPLETION OF REPAIR – The length of time to complete your vehicle's repair may exceed customary times due to (i) parts availability (ii) material shortages and/or (iii) labor shortages. Due to these issues, the length of time to complete the repair may exceed the insurance company approved time for rental charges. Caliber is not responsible for rental charges beyond the insurance company approved rental period for issues outside of Caliber's control. Caliber is not responsible for these costs and is not responsible if insurance coverage is not sufficient to pay these costs. _____**Customer Initials**

ADDITIONAL FUEL REQUIRED - Please note that if your vehicle is equipped with one or more Advanced Driver Assist Systems (ADAS) – for example blind spot monitor, lane keep assist, distance cruise control, etc. - part of the repair process may include calibration of those systems. To calibrate ADAS to original equipment manufacturer specifications, certain years, makes, and models require proper weight distribution including a full fuel tank. If your vehicle and repair require additional fuel to be added, you will be responsible for the cost.

_____ **Customer Initials**

I acknowledge that I have removed all personal and valuable articles from the vehicle, and that I have been given the opportunity to erase personal data from vehicle systems. I understand that Caliber Collision will not be responsible for any belongings left in the vehicle or personal data allowed to remain in vehicle systems.

ACKNOWLEDGED/ACCEPTED BY: _____ **DATE:** _____