DIAGNOSTIC FEE & REPAIR AUTHORIZATION

Shop Sample Auto Repair **Address** 123 Main St, Anytown, OH 00000

Date in 2026-11-04 **Time in** 08:40 **Customer** Jane Doe

Phone (555) 010-0199 **Email** jane@example.com

Vehicle 2016 Honda Accord **VIN** 1HGCM00000A000000 **Plate** SAMPLE OH

Miles 81234 **Fuel** 1/4

Customer concern (in their words)

Grinds when stopping

Work authorized now

Diagnose front brakes

Diagnostic fee $140.00 **Applied to repair if approved** ☑ **Not applied** ☐

Diag hours 1.0 **Do not exceed** $140.00 **Contact before** text

Additional approvals (date, time, name, method, amount)

Return old parts? Y ☐ N ☑ **Storage terms** per state law

Customer sign **Date** **Advisor** John Smith

Laws vary by state; check your state's requirements.

Free template from greasegoose.xyz