

Damage Repair Authorization

Date: [Insert Date]

To: [Auto Repair Shop Name]

Address: [Auto Repair Shop Address]

Phone: [Auto Repair Shop Phone Number]

Dear [Repair Shop Manager's Name],

I, [Your Name], the owner of the vehicle with the following details, hereby authorize the necessary repairs to be performed:

- Vehicle Make: [Make]
- Vehicle Model: [Model]
- Year: [Year]
- VIN: [Vehicle Identification Number]

The estimated repairs to be performed include, but are not limited to:

[List of damages to be repaired]

I understand and agree that the shop will contact me for any additional repairs or costs that arise beyond the initial estimate prior to proceeding.

Please proceed with the repairs at your earliest convenience.

Thank you,

[Your Signature]

[Your Printed Name]

[Your Address]

[Your Phone Number]

[Your Email Address]