



AGREEMENT TO REPAIR & FINANCIAL POLICY

Usual and Customary Rates

We are committed to providing our customers with high quality automotive repair and we charge reasonable and comparable fees for our area.

Insurance Billing

We will bill any insurance company for which we receive *complete* billing information. This does not release the customer/vehicle owner of their obligation to make sure all fees are paid. The responsibility of payment is the direct obligation of the customer/vehicle owner regardless of insurance. There are a vast number of insurance companies, each having their own practices and procedures. We may have some knowledge of the handling insurance company's policies, but please remember the final decisions regarding their obligations to you are between you and the insurance carrier.

For insurance claims, all deductibles are due in full upon completion of repairs. If you have received an insurance check(s) for the repair of the vehicle, you are required to pay those funds at the time of repair completion. If we have supplemental charges above the amount of the original insurance estimate, we will bill the insurance carrier directly for those charges.

Self Pay Customers

Customers who are not working with an insurance company are required to pay a 50% down payment when their repair appointment is scheduled. The balance will be due upon completion of repairs.

Third Party Billing

Our policy is *not* to bill third party. Private parties or businesses are considered third party. We consider customers with third party relationships to be Self Pay Customers. We can accept credit card payments directly from your third party, however it is your responsibility to pre-arrange payment details directly with them.

Rescheduling

We request that you contact us to reschedule a repair appointment within 10 business days of the original appointment. If we do not hear from you within that 10 day period, we consider the appointment to be cancelled and any applicable cancellation fees will apply.

Cancellation Policy

A minimum fee of \$25.00 will be charged on all cancelled repair appointments. If we have ordered and received parts, the cancellation fee will be 25% of the cost of all parts ordered. (If this percentage is less than \$25.00, the \$25.00 fee will apply.)

Collection Policy

All payments are due upon completion of repairs, with the exception of supplemental insurance charges, which will be billed directly to the insurance carrier. Any unpaid insurance charges will be billed to the vehicle owner at 60 days. At that time, these charges are to be paid directly to Auto Hound Collision Center and are due upon receipt.

Methods of Payment

We accept cash / money orders, personal checks, insurance checks, Visa, MasterCard or Discover. A standard 2.5% processing fee will be added to all credit card charges, there is no fee for debit processing.

PLEASE REMOVE ALL VALUABLES FROM YOUR VEHICLE. WE ARE NOT RESPONSIBLE FOR LOSS OR DAMAGE TO YOUR VEHICLE, OR FOR ANY ARTICLES LEFT IN THE VEHICLE IN CASE OF FIRE, THEFT, ACCIDENT, OR ANY OTHER CAUSE BEYOND OUR CONTROL.

Printed Name

Signature

Date

Insurance Direct Pay Authorization

I give _____ Permission to pay
Insurance Company

Auto Hound Collision Center directly for the following claim:

Claim Number	Year	Make	Model
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Once Auto Hound has released my vehicle to me, if I receive an insurance check(s) issued to me for the repair of this vehicle under this claim, I understand I am to sign over this(these) drafts to Auto Hound. If Auto Hound receives an insurance check(s) co-payable to me for the repair of this vehicle under this insurance claim, I authorize them to print my name on the back of the check in order to deposit the draft(s).

PLEASE REMOVE ALL VALUABLES FROM YOUR VEHICLE. WE ARE NOT RESPONSIBLE FOR LOSS OR DAMAGE TO YOUR VEHICLE, OR FOR ANY ARTICLES LEFT IN THE VEHICLE IN CASE OF FIRE, THEFT, ACCIDENT, OR ANY OTHER CAUSE BEYOND OUR CONTROL.

Printed Name	Signature	Date
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Customer Contact Preferences

We would like to keep you updated during the process of repairs. Please fill out your contact preferences so we may serve you better. Thank you!

Do you prefer to receive updates via phone or email? (Check one below.)

- Phone: _____
- Email: _____

How often would you like to be contacted while your car is here?

- Once per week (Wednesdays)
- Twice per week (Tuesdays & Thursdays)
- Call only when car is completed

If you have any other specific requests or concerns, please list them below:
