

**BARNES BODY SHOP, INC.**  
**282 School Road**  
**Bedford, PA 15522**  
**(814) 623-2744**

Name: CARL OR PAM FEIGHT License Plate: \_\_\_\_\_  
Address: 1113 MILK AND WATER ROAD, EVERETT, PA 15537  
Home Phone: 814-652-2997 Work/Cell Phone: \_\_\_\_\_  
Year: 2004 Make: NISSAN Model: MURANO  
Insurance Company: 1ST CHOICE Claim Number: 0021800023

I authorize the repairs, as described on the estimate, to be performed by utilizing the necessary labor, parts and materials. I grant permission to operate the vehicle herein described for the purpose of testing/inspecting. I agree that Barnes Body Shop, Inc. is not responsible for any loss or damage to the vehicle, articles left in the vehicle in case of fire, theft or any other cause beyond our control, or for delays in part shipment. An express Mechanic's Lien is hereby acknowledged on the vehicle to secure the amount of repairs thereto.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

I do hereby appoint Barnes Body Shop, Inc. as my limited Power of Attorney to accept on my behalf any and all checks or drafts, and endorse such checks or drafts to Barnes Body Shop, Inc., for credit on my account for repairs on my vehicle.

I am satisfied with the repairs completed and I direct my insurance company to pay Barnes Body Shop, Inc. directly on the aforementioned claim number, for the final bill. In the event that the insurance company inadvertently mails the settlement check to me in error, I agree to notify Barnes Body Shop, Inc. immediately and deliver such check to Barnes Body Shop, Inc. within 24 hours of my receipt of such check.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date