

**Caton Auto Clinic Mall Night Drop Form**

**Personal Information:**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_ **Secondary Phone:** \_\_\_\_\_

**Vehicle Information:**

**Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **Year:** \_\_\_\_\_  
**My car is here today for (please circle):**  
-Lee Myles Transmissions    -Caton Auto Clinic    -American Car Care

**Engine/Transmission Performance (Circle All that Apply)**

Slips or Hesitations	Problems Shifting	Jerks on the shift
No movement at all	No forward movement	No movement in reverse
Jumps out of gear	No power	Leaking
Speedometer not working	Bangs into gear	Cruise Control not working
Engine runs rough	Engine hard to start	Vehicle overheating

Unusual Noises/ Vibrations (please explain): \_\_\_\_\_  
\_\_\_\_\_

**The main problem with my car is:** \_\_\_\_\_  
\_\_\_\_\_

**The problem is (please circle):** -Intermittent    -Constant (at all times)    -Only in AM

**I would also like to have done:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Have these problems been worked on before?** \_\_\_\_\_  
\_\_\_\_\_

**Briefly state any other conditions that were experienced or repair work performed in the last six months:** \_\_\_\_\_  
\_\_\_\_\_

**Are there any adjustments on your vehicle you would like us to pay special attention to?** \_\_\_\_\_  
\_\_\_\_\_

By signing below, I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employee's permission to operate the vehicle described for testing and/or inspection. Express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. WE ARE NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT, OR ANY OTHER CAUSE.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_