

Repair Authorization Form

Authorize Gemini Auto Body & Paint to begin work on your vehicle.

This authorizes Gemini Auto Body & Paint to perform collision repair work as described in the attached estimate. Please read each section before signing.

Customer & Vehicle

Full name

Phone number

Email address

Vehicle — year, make, model, color

VIN

License plate

Current odometer reading

Insurance

Insurance company

Policy number

Claim number

Deductible amount

Terms of Authorization

- **Scope of work.** I authorize the repairs described in the estimate (Estimate # _____). If additional damage is found during disassembly, I will be notified before extra work proceeds.
- **Payment.** I am responsible for the deductible listed above and any charges not covered by insurance. Payment of the deductible is due at pickup unless other arrangements are made in writing.
- **Insurance coordination.** I authorize Gemini Auto Body & Paint to communicate directly with my insurance company regarding the estimate, supplements, and claim status.
- **Parts.** Repairs may use OEM, aftermarket, or recycled parts as specified in the estimate and consistent with insurance requirements.
- **Warranty.** Gemini Auto Body & Paint provides a **lifetime warranty** on workmanship for as long as you own the vehicle. Paint warranties vary by product and are documented separately. Excludes normal wear, external rust damage, and subsequent collisions.
- **Storage.** Vehicles not picked up within 5 business days of completion notice may incur a \$25/day storage fee.
- **Right to choose.** Under California law, I have the right to choose any repair facility. My insurer cannot require me to use a specific shop.

Customer signature

Date

Gemini Auto Body & Paint representative

Date

Questions? Call (408) 216-0548 or visit geminiautobodyshop.com.

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