

Vancouver Cluster Repair

604-761-3291

REPAIR FORM

Name _____ Date: _____

Address _____

City _____ Prov. _____ Postal code _____

Daytime Phone #(Cell) _____ - _____ - _____ email _____ @ _____

Vehicle Year _____ Make _____

Model _____

Does fault happen under special conditions? _____

Effected by Heat? _____ Cold? _____ Rain? _____ Intermittant? _____

Have you or someone else attempted repairs? Yes ___ No ___ Unknown ___

Is there physical damage to the item? Yes ___ No ___

Please describe the fault: _____

By signing below, you agree to authorize Vancouver Cluster Repair to carry out the requested repairs and have authorized the purchase of the repair.

X _____ Date: _____

VANCOUVER CLUSTER REPAIR

13254 249 STREET

MAPLE RIDGE B.C.

V4R 1R8

604-761-3291