



919-876-7707
4916 Alpinis Dr. Raleigh, NC 27616

Direction to Pay/Authorization

Owner/Claim Information

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Year: _____ Make: _____ Model: _____

VIN: _____

Insurance Company: _____ Claim Number: _____

By signing this document I agree to pay my deductible, determined by the insurance company, to Piperformance at the time of pick up.

Direction to Pay

I authorize _____ Insurance Company to pay Piperformance directly on claim number _____.

In the event the insurance or adjustment company inadvertently mails the settlement/supplement check to me in error, I hereby agree to notify the repair facility immediately and deliver the check to that facility within 24 hours of my receipt of said check.

Authorization

I hereby authorize Piperformance and/or its affiliates, to perform the repair work in this estimate with the necessary parts and materials, and hereby grant Piperformance, and/or your employees/affiliates, permission to operate the vehicle herein described on streets, highways or elsewhere, at your discretion, for the purpose of testing and/or inspection. ***If I do not proceed with a repair after the repair has been authorized and parts have been ordered, I may be assessed 25% of the price of the parts as a restocking fee. Special order parts may require pre-payment and cannot be refunded unless defective.***

I understand that Piperformance is not responsible for delays or other consequences due to the unavailability of parts shipments beyond their control. Piperformance is also not responsible for damage or loss of articles left in the vehicle in case of fire, theft, or any other cause beyond our control.

Customer Printed Name

Customer Signature

Date