



Service
Promise to Care

Pre-Service Check-In

Dear Finnin Kia Customer,
To accelerate your visit with our service department and more accurately complete the service you request, please take a few moments to complete this form. Thank you for your patience and assistance.

NOTE: When completed, please email it to us AND let us know the location of your keys.

*** Required Field** (**)***_****

***Name:** _____ ***Phone:** _____
 Mobile Home Business

***Address:** _____ **Preferred Method(s) of Contact:**
 Email Text Video Chat:
 Skype FaceTime ZOOM Other

***City:** _____ ***State:** _____ ***ZIP:** _____

***Email:** _____ @ _____

***Year:** _____ ***Make:** _____ ***Model:** _____ **Color:** _____ **Lic Plate No:** _____

Vehicle Identification Number (VIN), if available: _____ ***Mileage:** _____

REQUESTED SERVICE

Oil & Filter Change	Driveability: Please select:
Tire Rotation	
Balance Wheels	Fluid Leak - List Color:
Washer Fluid Fill	
Wiper Blades	Multi-Point Inspection/System Inspection:
Mileage Interval Service:	
Pre-Paid Maintenance Service Plan (Extended)	
Four Wheel Alignment	

OTHER CONCERNS/SPECIAL NOTES/ADDITIONAL REQUESTS

Enter Other concerns:

I hereby authorize the above repair to be done along with the necessary material, parts and grant you and/or your employees permission to operate the vehicle described herein on streets, highways or elsewhere for the purpose of testing and/or inspection. In addition to this authorization, I permit the pre-tax sales amount indicated in Estimate box as my current limit and agree that Finnin KIA will call me with an additional amounts needed prior to repair.

*Signature Authorizing Repair/Service Date

Estimate Amount Authorized: