

BOAT WORK ORDER

Customer Info:

Name _____
Address _____
City _____ State _____ Zip _____
Phone # _____ Secondary # _____
Email address _____

Boat Info:

Year _____ MC# _____ Hull ID _____
Make _____ Model _____
Motor Info _____

DESCRIBE THE PROBLEM OCCURRING

(A DETAILED DESCRIPTION IS REQUIRED BEFORE WORK CAN BEGIN)

Do you want to see the old parts? Yes No

I approve any repairs or costs with a total under \$ _____

If no cost is written your signature is approving \$400 for diagnostics.

I intend to pay with:

Cash Check Credit Card ****Credit card payments incur a 3.0% processing fee****

I acknowledge that Advantage Marine Repair assumes no responsibility for any lost, stolen, or damaged item while my unit is here for repairs, drop off or pickup.

I agree to pick up the boat within **48 hours** of completion of repairs or incur a fee of \$25.00 per day (UNLESS PRE-ARRANGED)

Signature _____ **Date** _____

**PLEASE LEAVE YOUR KEYS IN THE BOAT, NO LOCK ON TRAILER,
AND BRING A COVER, THE BOAT MAY SIT OUTSIDE.**