APPENDIX B

Waiver of Estimate

Section 1-1

REQUIREMENTS

A waiver of estimate must be obtained by a repair facility from a customer who does not wish to receive a written estimate for motor vehicle repairs. A sample waiver of estimate form is shown on the next page. The format must meet certain requirements, as follows:

1. The illustration must be printed in at least 14-point bold, capital type face, which is the minimum type size required by the Act;
   (a) The first blank entry space is completed with the customer’s name;
   (b) The second blank entry space is completed with the name of the repair facility;
   (c) The third blank entry space is for the repair facility registration number;
   (d) The fourth blank entry space, which is preceded by a dollar sign, is completed by the customer entering a dollar amount beyond which the customer is not willing to waive their right to an estimate. If the customer does not set such a dollar limit, then a statement, such as "no limit" must be made by the customer. This entry space must be completed and not left blank.
   (e) Information under Motor Vehicle Description must include sufficient information to identify the vehicle, such as a Vehicle Identification Number.

2. The customer must sign the waiver and complete the date and time of day information.

3. The repair facility must provide the customer a copy of the signed document.

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WAIVER OF ESTIMATE

"I, _________________________________, VOLUNTARILY AUTHORIZE _________________________ TO PROVIDE SERVICES OR PARTS IN THE REPAIR OF THE BELOW DESCRIBED MOTOR VEHICLE WITHOUT RECEIVING AN ESTIMATE OF REPAIR COSTS. BY SIGNING THIS FORM, I UNDERSTAND THAT I WILL GIVE UP MY RIGHT TO:

1. RECEIVE A WRITTEN ESTIMATE OF THE COST FOR REPAIRS;
2. APPROVE IN ADVANCE ANY REPAIRS OR COSTS WITH A TOTAL COST UNDER $ ____________________; AND
3. REFUSE TO PAY FOR REPAIRS WITH A TOTAL COST LESS THAN THE AMOUNT STATED ABOVE.

THE FACILITY MAY EXCEED THE AMOUNT STATED ABOVE ONLY AFTER I GIVE MY WRITTEN OR ORAL APPROVAL.

MOTOR VEHICLE DESCRIPTION: _________________________________
________________________________________________________________
________________________________________________________________

CUSTOMER SIGNATURE__________________________________________

DATE __________
TIME __________ ".

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