## **PATRIOT INSPECTIONS LLC**

83 Irons St Suite 1 Toms River, NJ 08753

PIF 001382

Phone: (848) 241-1095 Office@PatriotVehicleInspections.com

## **Service Request Form**

 Company Name:
 \_\_\_\_\_\_ Contact Person:

 Phone Number:
 \_\_\_\_\_\_ Address:

DOT #

Address where tests are to be performed:

Truck / Unit #	Make	License Plate	Last 4 Digits of VIN#	Current Reg Exp Date	Diesel Emissions Must be Marked(X) (\$100)	Gas Emissions Must be Marked(X) (\$100)	DOT Annual Inspection TRUCK Must be Marked(X) (\$90)	DOT Annual Inspection TRAILER Must be Marked(X) (\$85)

Terms and conditions:

I understand and agree that appointments must be cancelled 7 days prior to scheduled service date. If services requested cannot be completed due to weather, the appointment shall be re-scheduled with no penalty. If all services requested are not completed at scheduled time and at no fault of Patriot Commercial Vehicle Inspections LLC, I understand that we are responsible for payment of all scheduled vehicles and services in full, less the price of the sticker(s) and that this payment does not cover return trip or subsequent re-scheduling of any vehicles later or time. Billing for services scheduled to be done but not rendered at scheduled time due to extenuating circumstances may not be billed at the discretion of Patriot Commercial Vehicle Inspections LLC and on a case-by-case basis.

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Signature of	company	representative
Signature of	<b>v</b> ompany	representative

Date