

DM# _____

Cust#: _____

Date Received: _____

Marine Service Center

Lake Powell Resorts & Marina

P.O. Box 1597

Page, AZ 86040

Phone: (928) 645-1071

Fax: (928) 645-1169

Name: _____ Boat Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers: _____

Work: _____ Home/Cell: _____ Fax: _____

METHOD OF PAYMENT (Sorry we do not accept checks)

Services will not be started until a credit card number and an authorizing signature are provided.

FOR YOUR PROTECTION CREDIT CARD INFORMATION IS NOT KEPT ON FILE

Credit Card # (AMEX/DISC/MC/VISA): _____ Exp Date: _____ CVV#: _____

Location: _____ Buoy #: _____ Slip #: _____ Dry Storage #: _____

Make of Boat: _____ Description: _____ Length: _____ Year Manufactured: _____

Type of Motor(s)	Make of Motor							
___ Outboard	___ Mercury	___ Johnson/Evinrude	___ Other	___ Single	___ Twin	_____ Horse Power	_____ Year	

___ Stern Drive	___ MerCruiser	___ OMC	___ Volvo	___ Other	___ Single	___ Twin	_____ Horse Power	_____ Year
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___ Other _____

Location of Keys: _____ Date(s) Boat will be available: _____

We CANNOT work on your boat without the keys

Please describe in detail services being requested. Include additional pages as needed.

I hereby authorize the work as indicated above to be done along with the necessary materials, and hereby grant you and/or your employees permission to operate the boat herein described on waterways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on the referenced boat to secure the amount of repairs thereto.

A THIRTY (30) DAY WARRANTY is given on all work performed. All corrections to work performed must be evaluated and repaired by us in cases where a warranty claim is submitted. This warranty is VOID in cases where the work performed has been altered or tampered with in anyway. No other warranty is expressed or implied.

We are not responsible for loss or damage to boats, motors or articles left in boats in case of fire, theft, accident, inclement weather or any other cause beyond our control.

Authorizing Signature: _____

C:\Users\cruz\b\Desktop\email.work.order