



Automotive Make Keys To Vehicle Authorization And Payment

- 1) This is a fillable form that can be completed on a phone, tablet or computer - Download form to your device or open with Adobe Acrobat.
- 2) If you do not wish to fill out this form electronically you can print it off & fill it out
- 3) If you do not agree to the below terms do not print your name on this form.
- 4) Your printed/typed name & Initials on this form will be recognized as an electronic signature.

Date _____ Company / Customer Name _____
 Address _____ City _____ Province _____
 Postal Code _____ Email (For Receipt) _____ Ph# _____
 Name on Card _____ Form of Payment (M/C or Visa) _____
 Credit Card Number _____ Expiration Date _____
 CV (3 digit code on back of card) _____ Authorizing Signature Type Name _____
 Drivers License Number _____

First: _____ Last: _____

I, _____ authorize Lock Surgeon/Door Surgeon/Door + Lock Surgeon, herein to be referred to as Lock Surgeon, to make keys to my or company vehicle. VIN number: _____ Initial: _____

Thousands of vehicles get stolen every day. In order to obtain the security information required to make keys to your vehicle, Lock Surgeon must prove we are doing so for the registered owner. We require the below information along with this document filled out in full to be [emailed to makekeys@locksurgeon.com](mailto:makekeys@locksurgeon.com)

1. Clear Picture of Drivers license - Front & back - to be attached to this form or attached to the email with this form.
2. Picture of drivers license with the registered owner physically in the picture so we know your in possession of your drivers license. E.G. Selfie with drivers license beside your face.
3. Up to date Registration that matches the drivers license or corporate name. If the vehicle is corporately owned we require a letter on company letterhead, business card and signature from the CEO, COO, CFO, or GM authorizing the make keys. The letter must be signed by the above representative and also witnessed. Both the signer and witness must include a picture of their drivers license. See page 2 for an example letter.

First: _____ Last: _____

I, _____ authorize Lock Surgeon to share All the above information with the National Automotive service task force database. Person requesting make keys Initial _____ Witness "If corporately owned" initial _____

Pricing: I understand that some vehicles require only one key to complete the programming process. While other vehicles require 2 keys to complete the programming process. Initial _____

I understand the charges will be \$895 - \$995 for one key. If my vehicle requires 2 keys, the total cost will be between \$1095 and \$1595 as lock surgeon will discount the second key by \$100 (vehicle keys including programming range from \$195 to \$700)

I Authorize lock Surgeon to charge my credit card the \$895 - \$995 + 7% shop supplies and GST for one key and if a 2nd key is required to complete the programming process, I authorize Lock Surgeon to charge up to an additional \$600 (cost of second key minus \$100 discount) - Initial _____

I authorize lock surgeon to manually enter my credit card information for the charges above. Initial _____

I understand that Lock Surgeon will Charge my credit card before work is completed. Initial _____

Please include a picture of the front and back of the credit card and drivers license that is to be used for payment

I hereby declare that the information provided is true and correct.

Authorizing Signature Type Name _____ Date _____

If you are requesting keys be made and programmed to a company vehicle we require a letter with your company's letterhead on its as sampled below - Copy the below text to your company letterhead and then fill in.

Your company letter head info here

*Copy the below text to your letter head page then fill in and return it to us with the completed page 1 of this form:

I, first name - last name, act on behalf of Your Company Name Here, as the CEO, COO, CFO, GM or other (please describe your role within the company you work for). I am requesting and authorizing Lock Surgeon to make keys to our corporate vehicle VIN#_____. First Name - Last Name will be witness of my request and fills the position of: position here, at Company Name.

Please find attached, pictures of both our drivers licenses and business cards.

Requester _____ print and sign

Witness _____ print and sign

Dated: _____