

RPM Autos - Service Request Form

Customer Name: _____

Phone: _____ Email: _____

Vehicle Make/Model: _____ Year: _____

Registration / Plate: _____

Requested Service (tick or write):

- Oil Change - Brake Service - Wheel Alignment

- Battery Check - AC Service - Electrical Diagnosis

- Other: _____

Preferred Date: _____ Preferred Time: _____

Additional Notes:

By submitting this form you authorize RPM Autos to perform the requested work subject to standard terms.