(Date of Letter)

(Name of Business/Garage/etc.)

(Street Address)

(City, State and Zip Code)

RE: Repair Bill

Attn: Service Department

Dear Gentlemen:

On the day of (month/year), the following vehicle was presented to your garage for repair:

(identify the vehicle that was to be repaired). The repairs that were to be performed on the vehicle include:

(list repairs that were to be performed). For the services rendered, your business has submitted a statement for \$ . For the following reason(s), this amount cannot be paid:

(list reason(s) why payment will not be made, including inadequate repair, improper repair, wrong item repaired, additional problems created, etc.). For the reason(s) stated, it appears as though payment cannot be made until corrections are made to either the repair bill or to the vehicle in conjunction with the following:

(changes or corrections which need to be made). Your immediate attention to this matter is greatly appreciated. Should you have any questions, please do not hesitate to contact the undersigned. Thank you.

Very truly yours,

(Signature) (Address) (City, State and Zip Code) (Phone Number)

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