



MILEAGE ADJUSTMENT CONSENT FORM

Customer Information:

Name:

Address:

Phone Number:

Email:

Vehicle Make: Model:

VIN (Vehicle Identification Number):

Mileage Adjustment Request:

I, the undersigned, request that Auto & Truck Electronics perform a mileage adjustment on my vehicle's instrument cluster.

Current Mileage on Instrument Cluster:

Desired Mileage:

Agreement & Consent:

1. Purpose of Adjustment

I understand that the purpose of this mileage adjustment is to adjust mileage to the mileage when my cluster Failed.

2. Legal Compliance

I acknowledge that altering the mileage of a vehicle can be illegal if done with fraudulent intent.

I confirm that this request is made with full awareness of the legal implications.

3. Liability Release

I hereby release Automotive Scientific and Auto & Truck Electronics and Employees of same from any liability associated with this mileage adjustment, including but not limited to future legal consequences or misrepresentations of the vehicle's mileage.

4. Confirmation of Accuracy

I affirm that the provided mileage figures are accurate and truthful to the best of my knowledge.

5. Signature of Customer

By signing below, I confirm my understanding of the terms above and grant permission for Auto & Truck Electronics to proceed with the mileage adjustment.

Signature:

Date:

For Internal Use Only:

Technician Name:

Service Date:

Notes: