



MILEAGE DISCREPANCY AFFIDAVIT

EMAIL: autocsolutions@gmail.com

PHONE: (417) 755-0179

MILEAGE THAT IS CURRENTLY ON UNIT (REQUIRED) _____

MILEAGE TO BE PROGRAMMED (ORIGINAL MILES) _____

CHECK ONE ONLY

_____ I hereby certify that to the best of my knowledge the odometer reading as stated above reflects the actual mileage of the vehicle described below.

_____ I hereby certify that to the best of my knowledge the odometer reading as stated above is NOT the actual mileage of the vehicle described below and should not be relied upon.

AUTOMOTIVE CIRCUIT SOLUTIONS HAS ADVISED ME OF MY LEGAL OBLIGATION TO NOTIFY PROSPECTIVE PURCHASERS THAT THIS VEHICLE'S MILEAGE HAS BEEN ALTERED. I HAVE ALSO BEEN ADVISED THAT CHANGING MILEAGE FOR PERSONAL GAIN IS A SERIOUS OFFENSE FOR WHICH I MAY BE PROSECUTED.

YEAR, MAKE & MODEL: _____

VIN NUMBER: _____ HOURS: _____

REASON FOR ALTERATION IS

_____ THE ORIGINAL MILEAGE HAS BEEN CORRUPTED

_____ A REPLACEMENT CLUSTER IS TO BE INSTALLED COPYING THE ORIGINAL DATA IS REQUIRED

_____ OTHER: _____

AUTOMOTIVE CIRCUIT SOLUTIONS RESERVES THE RIGHT TO REFUSE ANY WORK AND WITHOUT EXPLANATION. I/WE ACCEPT THE ABOVE TERMS AND CONDITIONS. I/WE ARE FULLY AWARE OF THE LEGAL IMPLICATIONS IMPOSED. I FULLY AGREE THAT AUTOMOTIVE CIRCUIT SOLUTIONS AND ITS EMPLOYEES, OFFICERS, AGENTS, REPRESENTATIVES SHALL BE HELD HARMLESS FROM ANY AND ALL CLAIMS, ACTIONS, CAUSE OF ACTIONS, DEMANDS, RIGHTS, DAMAGES, AND ATTORNEY FEES RELATING TO OR ARISING OUT OF AUTOMOTIVE CIRCUIT SOLUTIONS WORK ON THE ODOMETER.

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

MOBILE# _____ HOME# _____

EMAIL ADDRESS: _____

PAYMENT METHOD (CHOOSE ONE ONLY)

_____ BUSINESS CHECK OR MONEY ORDER #: _____

_____ PAYPAL CONFIRMATION NUMBER: _____

_____ CREDIT CARD OVER THE PHONE ENDING IN _____

_____ ORDER #: _____

SIGNATURE: _____ DATE: _____

BY SIGNING THIS FORM, I HAVE READ AND FULLY UNDERSTOOD THE INFORMATION DISCLOSED ABOVE.