

The Dry Cleaning Man  
P.O Box 2271  
Woodstock, Georgia 30118  
770-924-1930 Phone  
770-591-9576 Fax  
info@TheDryCleaningMan.com



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## ***Service Authorization Agreement***

### **Company Guarantee**

The Dry Cleaning Man guarantees its service to all of our customers.  
All items will be given the utmost attention and care.

If you are dissatisfied with the service or care of any item, The Dry Cleaning Man will immediately correct the problem to your satisfaction.

### **Limit of Liability**

The Dry Cleaning Man does its best to inspect every garment thoroughly prior to processing. However, The Dry Cleaning Man will not be responsible for items that are damaged upon receipt and will notify client and require approval to continue with the cleaning process.

### **Authorization**

I, \_\_\_\_\_, authorize The Dry Cleaning Man to make pick ups and deliveries of my laundry and dry cleaning items at the address and location below. I understand that my first cleaning order will be charged to the credit card listed below, and that this credit card will be kept on file by The Dry Cleaning Man. In the event of delinquency of my account, I authorize The Dry Cleaning Man to charge the balance due to said credit card.

#### **Billing Information**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_  
Credit Card #: \_\_\_\_\_  
Exp. Date: \_\_\_\_\_  
  
Drivers License #: \_\_\_\_\_

#### **Delivery Information**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

**Special Instructions:**  
**ie: Starch Preference:** \_\_\_\_\_  
**Delivery Location:** \_\_\_\_\_  
**Garage Door Keypad Code:** \_\_\_\_\_  
**Other:** \_\_\_\_\_

I have read and understand the terms and conditions as set forth in this service authorization form. I further understand that I may terminate this agreement with The Dry Cleaning Man at any time without obligation, provided that there are no outstanding balances for services already rendered.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_