

<p><b>PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:</b>          I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.  <input type="checkbox"/> I REQUEST A WRITTEN ESTIMATE.  <input type="checkbox"/> I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$_____.          THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.  <input type="checkbox"/> I DO NOT REQUEST A WRITTEN ESTIMATE.</p> <p>SIGNED: _____ DATE: _____</p>					_____ month/ _____ mile warranty on all parts and labor unless otherwise specified.		
					Intended Payment Method: CASH CHECK VISA MC AMEX		
					Date: _____ Time: _____		
					Proposed Completion Date: _____		
Name: _____					Home Ph: _____		
Address: _____					Work Ph: _____		
City: _____ State: _____ Zip: _____					Phone: _____		
Other Authorized Person: _____					Tag: _____ Miles In: _____		
Year/Make: _____ Model: _____					Miles Out: _____		
VIN# : _____							
*U/Used R/Rebuilt RC/Reconditioned NC/ No Chg/Warranty RD/Reduced/					Save Old Parts: Yes No (Core may apply)		
QTY	PART NO	DESCRIPTION	*	PRICE	EXTEND	Customer Complaint/Problem:	
						LABOR CHARGES BASED ON: FLAT RATE _____ HOURLY RATE BOTH APPLY	
						ESTIMATE/DIAGNOSTIC FEE: \$ _____ /OR HOURLY AT \$ _____ PER HOUR	
						A storage fee of \$ _____ per day may be applied to vehicles which are not claimed within 3 working days of notification of completion	
						<b>DESCRIPTION OF REPAIRS</b>	<b>LABOR</b>
						<input type="checkbox"/> ESTIMATE <input type="checkbox"/> INVOICE	<b>CHARGES</b>
							PARTS:
							\$
							LABOR:
							\$
							SUBLET/OTHER
							\$
							** SHOP SUPPLIES
							\$
Estimate good for 30 days. Not responsible for damage caused by theft, fire or acts of nature. I hereby authorize the above repairs, including sublet work, along with the necessary materials. You and your employees may operate my vehicle for the purpose of testing, inspection and delivery at my risk. If I cancel repairs prior to their completion for any reason, a tear down and reassembly fee of \$ _____ will be applied.  X _____ Date _____						***FEES\$	
						Subtotal:\$	
						Tax: \$	
						<b>TOTAL:</b> <b>\$</b>	
**This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal. ***FS403.718 mandates a \$1.00 fee for each new tire sold in the State of Florida. ***FS403.7185 mandates a \$1.50 fee for each new or remanufactured battery sold in the State of Florida.							