PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $100.
_____I REQUEST A WRITTEN ESTIMATE.
_____I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
_____I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED _____ DATE _____

M&A Truck and Trailer Repair Inc.	_____month/_____mile warranty on all parts and labor unless otherwise specified.
403 North Blvd West	
Davenport, FL 33837	Intended Payment Method:
(352)551-8442	CASH ☐ CHECK ☐ VISA ☐ MC ☐
Fax#863-424-0490	Date 2/2/19 Time
FLORIDA REGISTRATION #MV88635	

Name CDST TRANSPORT — Proposed Completion Date:

Address 3102 JOSEPH ROAD — OFFICE

City :VALDOSTA State GA Zip31601 — CELL 352-322-1109

AUTHORIZED BY: JIM — FAX#

Year/Make KW — UNIT 144001 — MILEAGE 586392

VIN 1XKYDP9X0GJ484311

*U/Used R/Rebuilt RC/Reconditioned NC/ No Chg /Warranty RD/Reduced/

Save Old Parts: ☐ Yes ☐ No (Core may apply)

Customer Complaint/Problem BRAKES &DRUMS

QTY	PART NO	DESCRIPTION	PRICE	EXTEND
4	85-123207	DRUMS	$552.00	
2	XK3124709E2	SHOES	$273.19	

LABOR CHARGES BASED ON:
☐ FLAT RATE_____ ξ HOURLY RATE $ 60.00 HR
☐ BOTH APPLY_____ x _____ Mileage$1.25per mile

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

INVOICE # 13747
DESCRIPTION OF REPAIR: — LABOR — CHARGES

REPLACE BRAKES AND DRUMS REAR AXLES

PARTS
$ 825.19

LABOR HR@$ 60.00 HR
$180.00

MILES R/TRIP @$1.25mi
$

** DISPOSAL FEE
$

TOLLS $

SUBTOTAL $1005.19

TAX $70.36

BALANCE DUE:
$1075.55

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_____