

☐ I REQUEST A WRITTEN ESTIMATE.  
☐ 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.  
☐ I DO NOT REQUEST A WRITTEN ESTIMATE.

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

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**

Name CDST TRANSPORT

Address 3102 JOSEPH ROAD

City :VALDOSTA State GA Zip31601

Work Authorized by: JIM ROSESKI

Year/Make VOLVO

UNIT # 144020

VIN 4V4NC9EH7JN886682

**ENG S/N**

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

[illegible]

LABOR CHARGES BASED ON:

☐ FLAT RATE \_\_\_\_\_      § HOURLY RATE \$ 60.00 HR  
☐ BOTH APPLY                      x            Mileage \$ 2.00 per 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 # 13824**

## LABOR

## CHARGES

**DESCRIPTION OF REPAIR:**

LF 16/32	RF 16/32
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LABOR. HR@\$ 60.00	HR
<b>\$30.00</b>	

LFI 26/32 LFO 26/32 LRI 26/32 LRO 26/32

RFI 25/32 RFO 25/32 RRI 25/32 RRO 25/32

	MILES R/TRIP @\$1.25mi
\$	

\*\* DISPOSAL FEE

TOLLS \$

	<b>SUBTOTAL \$32.26</b>
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	<b>TAX \$2.26</b>
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**BALANCE DUE:**  
**\$34.52**

