| PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN: I UNDERSTAND THAT, UNDER STATE LAW, I AM | | | | | M&A Truck and Trailer Repair Inc. 403 North Blvd West Davenport, FL 33837 | | month/mile warranty on all parts and labor unless otherwise specified. | | |
|--|------------------------|--------------------------------|---------------------------------|---------------------|---|---------------------|--|--|--|
| ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL | | | | | (352)551-8442 | | Intend | Intended Payment Method: | |
| WILL EXCEED \$100. | | | | Fax#863-424-0490 | | CASH 🗆 | CASH CHECK VISA MC | | |
| | | WRITTEN ESTIMATE | | | FLORIDA REGISTRATION #MV88635 | | | | |
| I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCED \$ | | | | Name CDST TRANSPORT | Γ | Proposed Com | Proposed Completion Date: | | |
| | | | Address 3102 JOSEPH ROAD | | OFFICE | | | | |
| MY WRITTEN OR ORAL APPROVAL. | | | City:VALDOSTA State GA Zip31601 | | CELL | 407-468-0641 | | | |
| | I DO NOT REC | QUEST A WRITTEN E | STIMATE. | | AUTHORIZED BY: JIM | FAX# | | | |
| 010 | NED | DAT | | | Year/Make | UNIT 148133 | MILEAGE | 94017 | |
| SIG | NED | DA1 | l E | | VIN | _ | | | |
| *U/l | Jsed R/Rebuilt RC/Reco | nditioned NC/ No Chg /Warranty | RD/Reduced/ | | Save Old Parts: Yes | No (Core may apply) | | | |
| QTY | PART NO | DESCRIPTION | PRICE | EXTEND | Customer Complaint/Proble | m WEEKLY INSP | | | |
| 1 | AS257 | BUG WASH | \$2.26 | | | | | | |
| | | | | | LABOR CHARGES BASED O ☐ FLAT RATE ξ HC ☐ BOTH APPLY x | | | GNOSTIC FEE: OR HOURLY AT PER HOUR | |
| | | | | | A storage fee of \$ per day may be applied to vehicles which are not claimed within 3 working | | | ring days of notification of completion | |
| | | | | | DESCRIPTION OF REPA | CE # 13937 AIR: | LABOR | CHARGES | |
| | | _ | | | | | | | |
| | | | | | LE 40/22 DE 44/22 | | | PARTS 2.26 | |
| | | | | | LF 13/32 RF 14/32 LFI 19/32 LFO 18/32 LRI 18 | R/32 RO 18/32 | | LABOR HR@\$ 60.00 HR | |
| | | | | | | | | \$ 30.00 | |
| | | | | | RFI 17/32 RFO 17/32 RRI | 18/32 RRO 17/32 | | • | |
| | | | | | | | | MILES R/TRIP @\$1.25mi | |
| | | | | | | | | ** DISPOSAL FEE | |
| | | | | | | | | \$ | |
| 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 | | | | | | TOLLS\$ | | | |
| 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. | | | | | | | SUBTOTAL \$32.26 | | |
| | | | | | | TAX \$2.26 | | | |
| X | | Date | | | | | , | BALANCE DUE: \$34.52 | |