

☐ 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 K&J TRANSPORT

Address 3102 JOSEPH ROAD

City :VALDOSTA State GA Zip31601

Work Authorized by: JIM ROSESKI

Year/Make VOLVO

UNIT # 144431

VIN 4V4NC9EH7EN172637

**ENG S/N**

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

Customer Complaint/Problem	WEEKLY INSP
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LABOR CHARGES BASED ON:

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

Intended Payment Method:

CASH ☐ CHECK ☐ VISA ☐ MC ☐

Date	3/3/2019	Time
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Proposed Completion Date:

Office:

Cell:

Fax#:

	MILEAGE
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49677
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	INVOICE # 13862
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**LABOR**

## CHARGES

DESCRIPTION OF REPAIR:

LF 12/32	RF 14/32
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**LFI 11/32 LFO 11/32 LRI 10/32 LRO 19/32**

RFI 11/32 RFO 12/32 RRI 9/32 RRO 8/32

	<b>PARTS</b>
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\$

LABOR. HR@\$ 60.00 HR

	\$30.00
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	MILES R/TRIP @\$1.25mi
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\$

** DISPOSAL FEE	
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\$

TOLLS \$	
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	<b>SUBTOTAL \$30.00</b>
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TAX	\$2.10
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**BALANCE DUE:**  
**\$32.10**

