

☐ 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.

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Name CDST TRANSPORT

Address 3102 JOSEPH ROAD

City :VALDOSTA State GA Zip31601

AUTHORIZED BY: JIM

Year/Make	KW
2000/2000	100
2001/2001	100
2002/2002	100
2003/2003	100
2004/2004	100
2005/2005	100
2006/2006	100
2007/2007	100
2008/2008	100
2009/2009	100
2010/2010	100
2011/2011	100
2012/2012	100
2013/2013	100
2014/2014	100
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2021/2021	100
2022/2022	100
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2025/2025	100
2026/2026	100
2027/2027	100
2028/2028	100
2029/2029	100
2030/2030	100
2031/2031	100
2032/2032	100
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2092/2092	100
2093/2093	100
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2095/2095	100
2096/2096	100
2097/2097	100
2098/2098	100
2099/2099	100
2100/2100	100

UNIT 144001

VIN 1XKYDP9X0GJ484311

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 \$1.25 per mile

A storage fee of \$_____ per day may be applied to vehicles which are not claimed within 3 working days of notification of completion

INVOICE # 13813

LABOR

CHARGES

DESCRIPTION OF REPAIR:

LF 14/32	RF 14/32
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LFI 14/32 LFO 13/32 LRI 9/32 LRO 11/32

RFI 14/32 RFO 13/32 RRI 9/32 RRO9/32

PARTS

	\$ 2.26
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LABOR HR@\$ 60.00 HR

\$30.00

	MILES R/TRIP @\$1.25mi
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	\$
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** DISPOSAL FEE	
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\$

TOLLS \$	
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	SUBTOTAL \$32.26
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	TAX \$2.26
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BALANCE DUE:
\$34.52