

YOUR COMPANY NAME

Address
City State Zip
Phone And Fax
Advertising Line

123456

Date

Time Received

A. M.

P. M.

Promised

A. M.

P. M.

Bus.

Res.

Phone when ready

☐ Yes ☐ No

Cust. Order No.

Estimator/Writer

Retain Parts

☐ Yes ☐ No

Name

Address

Apt. No.

City

State

Zip

Name of Additional Person
Who May Authorize Repair Work

Phone

Year-Make-Model

Engine Type

☐ 4 Cyl. ☐ 6 Cyl. ☐ 8 Cyl. ☐ Rot.

License No.

Vehicle I.D. No.

Odometer-In

Odometer-Out

Daily Storage \$

Diagnostic Charge \$

Rate:

☐ Flat☐ Hrly.☐ Both☐ Cash☐ Check☐ Credit Card☐ Charge

Unless otherwise provided by law, the seller (above named dealership) hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

REPAIR ORDER · LABOR INSTRUCTIONS

Est. Time
Hrs. 10'sEstimated
AmountActual
AmountServ.
Tech.

SPECIAL REPAIRS

BROUGHT FORWARD

TOTAL PARTS

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 EXCEED \$_____. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.

☐ I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED X _____ DATE _____

SAVE REPLACED PARTS ☐ YES ☐ NO

We guarantee our service work for _____ days
or _____ miles, whichever comes first.

Estimated Cost of
Repair Work

Total Labor

Total Parts

Repair Estimate Charges

DAILY STORAGE CHARGE: *\$ _____ /DAY

*NO DAILY STORAGE CHARGES SHALL ACCRUE OR BE DUE AND PAYABLE FOR A PERIOD OF 3 WORKING DAYS FROM THE DAY CUSTOMER IS NOTIFIED OF WORK COMPLETION.

I WAIVE REASSEMBLY OF MY VEHICLE INITIAL: _____

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection.

X _____

AUTHORIZED SIGNATURE

Sub Total

Tax

Gas

TOTAL AMOUNT

REPAIR ORDER

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