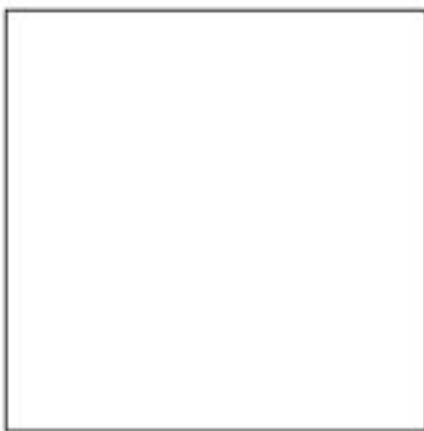


Body Shop Estimate Form



Address: _____
Phone: _____
Email: _____

Customer Information

Customer Name: _____
Phone Number: _____
Email: _____
Address: _____

Vehicle Information

Year: _____
Make: _____
Model: _____
VIN: _____
License Plate #: _____
Mileage: _____

Damage / Repair Details

Line #	Description of Part	Qty	Labor Hours	Rate	Parts Cost	Labor Cost	Total
Subtotals							
Tax (%):							
Grand Total:							

Additional Notes

I hereby authorize the repair work outlined above to be completed.
I understand this is an estimate only and actual costs may vary.

Customer Signature: _____
Date: _____

Estimator Name: _____
Date: _____