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.

__X__ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED __**$0.00**__. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.

SIGNED: _____ DATE: 06/27/2020

GUANE GAS STATION

GENERAL MECHANIC
1201 NW 7 ST, MIAMI, FL, 33125
Phs: 786-253-0646
MVR: 07110 MV-47286 INVOICE: 4945

____ month/mile warranty on all parts.

Intended Payment Method:

cash

Date: 06/27/2020 **Time:** 04:59 pm

Name: LUIS PADILLA			**Proposed Completion Date:**
Address:			**Home Ph:**
City:	**State:** FL	**Zip:**	**Work Ph:**
Other Authorized Person:			**Phone:** 4074107083
Year/Make: 2003 FORD	**Model:** F150 XLT	**Tag:**	**Miles In:** 0
VIN#:			**Miles Out:** 0

*U/Used R:Rebuilt RC/Reconditioned NC/No Chg/Warranty RD/Reduced/

Save Old Parts: no (Core may apply)

Qty	Part	Description	Price	Warranty
1	NT1515029	HUB BEARING (L)	129.99	1 year
2	YH145146	BRK SET ROTOR	30.00	2 year
1	GNAD679	BRK SET PAD GOOL	30.00	2 year
1	NCV1123	CV AXLE (L)	87.36	lifetime
1	BHA381365	HOSE RBK	19.99	1 year
1	K8695T	BALL JOINT (L)	47.34	lifetime
1	RK87722	CONTROL ARM	67.56	lifetime

Complaint/Problem:

Labor charges based on:
hourly rate

Estimate/diagnostic fee:
/ Or hourly at __**$ 0.00**__ Per hour

A storage fee of $ __**25**__ per day may be applied to vehicles which are not claimed within 3 working days

Description of Repairs (invoice)	Labor	Time
REPLACE BRK SET & ROTOR	80	1
REPLACE BALL JOIN & AXLE	140	1
LUBE AND FILTER	10	1

Charges
PARTS: **$ 442.24**
LABOR: **$ 230.00**
SUBLET/OTHER: **$ 0.00**
SUPPLIES: **$ 0.00**
FEES: **$ 0.00**
SUB-TOTAL: **$ 672.24**
TAX: **$ 47.06**
TOTAL: **$ 719.30**

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 __**$ 0**__ will be applied.

SIGNED: _____ DATE: 06/27/2020

**This charge represents costs and profits to the motor vehicle repair facility for miscellaneus shop supplies or waste disposal. ***FS403.718 mandates a $1.00 fee for each new tire sold in the Sate of Florida. ***FS403.7185 mandates a $1.50 fee for each new or remanufactured battery sold in the State of Florida.