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: 03/28/2019

GUANE GAS STATION

GENERAL MECHANIC
1201 NW 7 ST, MIAMI, FL, 33125
Phs: 786-253-0646
MVR: 07110 MV-47286 INVOICE: 2722

____ month/mile warranty on all parts.

Intended Payment Method:

cash

Date: 8/14/2018 **Time:** 6:59 pm

Name: YIMI			**Proposed Completion Date:**
Address:			**Home Ph:**
City:	**State:** FL	**Zip:**	**Work Ph:**
Other Authorized Person:			**Phone:**
Year/Make: 2002 FORD	**Model:** EXPLORE	**Tag:**	**Miles In:** 0
VIN#:			**Miles Out:** 0

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

Qty	Part	Description	Price	Warranty
1	T78542	A\C COMP \CLUTCH	190.00	2 year
1	T83096	A\C RECEIVER DRIVER	28.56	2 year
1	26722	AC RING GASKE	8.00	1 year
1	T38635	ORIFICE TIBE	2.25	2 year
1	59007	PREM PAG 46 OIL	15.00	1 year
1	39008	EXPACION VALVE REAL	18.56	2 year
1	215124	FAN CLUTCH	64.25	2 year

Save Old Parts: no (Core may apply)

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 A\C COMP KIT	240	1
FLOCHE A\C	60	1
REPLACE FAN CLUTCH	70	1

PARTS:
$ 326.62

LABOR:
$ 370.00

SUBLET/OTHER:
$ 0.00

SUPPLIES:
$ 0.00

FEES:
$ 0.00

SUB-TOTAL:
$ 696.62

TAX:
$ 48.76

TOTAL:
$ 745.38

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: 03/28/2019

**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.