|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Auto Repair Quote | | | | | | | **(Company Name)** | |
|  | (Quote number) | | (Issue Date) | | | | (Due Date) | | |
|  | | | | | | | | | |
|  | **Customer Information:** |  | | | | | | **Contractor Details:** | |
|  | (Name) | (Name) | |
|  | (Complete Address) | (Complete Address) | |
|  | (City, State, ZIP Code) | (City, State, ZIP Code) | |
|  | (Contact Number) | (Contact Number) | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | **Description/ Items** | | | | **Parts** | **Labor** | | | **Total** |
| Brake Repair | | | | 100 | 10 | | | $0.00 |
| Steering Case | | | | 100 | 10 | | | $0.00 |
| Filter Repair | | | | 100 | 10 | | | $0.00 |
| Oil Change | | | | 100 | 10 | | | $0.00 |
| Tuning | | | | 100 | 10 | | | $0.00 |
|  |  | | | |  |  | | |  |
|  | | | | | | Subtotal | | | $0.00 |
|  | | | | | | Tax (0%) | | | $0.00 |
|  | | | | | | Others | | | $0.00 |
|  | | | | | | **Grand total** | | | **$0.00** |
|  | | | | | | | | | |
|  | **Terms & Conditions:** | | |  | | | | | |
|  | * After accepting this quote customer will pay the bill. * Complete payment within 20 days. * Please Email or fax the signed quote to the mentioned email address. | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| Authorized Signature: | | | | | | | | | (Sign here) |
|  | | | | | | | | | |
| **THANK YOU!** | | | | | | | | | |