

						NAME					
YOUR COMPANY						ADDRESS			001001		
	123 A Any City, S	iny Street State, Zip C	Code	YOUR	2	CITY		PHONE	DATE OF ORDER		
XXX-XXX-XXXX LIC or BAR # or TAG LINE						CUSTOMER'S ORDER NO.	VIN NO.				
_				-				1			
						YEAR, MAKE AND MODEL		Retain Destroy Parts Parts	ODOMETER		
* CODE N-NEW U-USED R-REBUILT						ORDER WRITTEN BY		LICENSE NUMBER	DATE PROMISED		
QTY *	P/	ART NO. OF	R DESCRIPT	ΓΙΟΝ	SALE		LABO	 OR INSTRUCTIONS		AMOL	JNT
						GROSS VECH. WEIGHT I/M SMOG INSPECTION					
						Cert. No. I/M SMOG CERTIFICATE					
				TAL PARTS							
EMISSION CHECK OFF											
PCV			TWC								
TAC			EGR								
AIS			SPK								
EVP FR			CCO				ONTROL	DEVICES MAY STILL BE	TOTAL LABOR		
OC P-PASS F-Fail M-Modified D-Disconnect N-N/A				COVERED UNDER MFG.'S WARRANTY. BY LAW, YOU MAY CHOOSE ANOTHER LICENSED SMOG CHECK FACILITY TO PERFORM ANY NEEDED REPAIRS OR ADJUSTMENTS WHICH THE SMOG TEST INDICATES ARE NECESSARY. I, the Registered Owner authorize you to perform the above repairs and furnish							
ORIGINAL ESTIMATE AUTHORIZED \$ BY											
PHONE DATE TIME						necessary materials. I understand any cost quoted heretofore is an estimate only. You and your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection on any sum due I agree to pay costs of collection and reasonable attorney fees. I also understand that the Dealer is not a depositary for personal property left in the vehicle and assumes no risk for loss thereof.					
REVISED ESTIMATE REASON ADDITIONAL COST											
\$ SAUTHORIZED BY DATE TIME					TIME						
☐ PHONE #						RECEIPT OF A COPY OF THIS ORDER IS HEREBY ACKNOWLEDGED. SIGNATURE TOTAL A MOUNT					
APPROVAL OF AN INCREASE IN THE ABOVE ESTIMATED PRICE. SIGN						X			Amount		