



AUTO SERVICE AUTO BODY*426

"THE AUTO BODY SPECIALISTS"

165 Frenchtown Road, North Kingstown, RI 02852

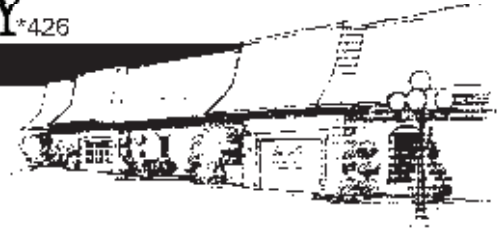
Tel: (401) 884-2300 or (401) 884-6000

Fax: (401) 884-6003

24 Hr. Towing: (401) 884-7177

www.autoserviceautobodyri.com

gmb@ri-auto.com



NAME		HOME		WORK		CELL		DATE	
ADDRESS							EMAIL		
YEAR	MAKE	MODEL	COLOR	REGISTRATION		VIN			
INSURANCE CO.		CLAIM NO.		DED.		RENTAL			
ADJUSTER		PHONE NO.		EXT.		FAX NO.			

Repair damage to vehicle as needed to pre-loss condition. Price includes all necessary parts, labor, paint & material.

Insurance estimate provided for informational purposes only. Additional work not listed on the insurance estimate may have been required and completed to assure quality of repairs. Non-safety concessions may have also been necessary to avoid any additional charges to customer due to the insurance company's refusal to negotiate an agreed labor rate.

PARTS	\$	_____
LABOR.....	\$	_____
PAINT & MATERIALS	\$	_____
SUBLET	\$	_____
TOWING	\$	_____
STORAGE	\$	_____
TAX	\$	_____
TOTAL.....	\$	_____

I hereby authorize Auto Service Auto Body to appraise, dismantle and repair the vehicle indicated above. I also authorize Auto Service Auto Body to operate the vehicle for purposes of testing, inspection, and/or delivery. Additionally, I also hereby acknowledge that the insurance company appraisal may not accurately reflect labor rates charged, or products and services provided to me by Auto Service Auto Body. I hereby authorize Auto Service Auto Body to repair my vehicle at its sole discretion; to use OEM parts where appropriate, and/or higher quality paint and/or materials, and to compensate for the difference in the shops posted labor rate from the insurance company prescribed rates, Auto Service Auto Body may make adjustments to the repair as set forth on the insurance appraisal. I further understand that Auto Service Auto Body will repair my vehicle to the highest industry safety standards. I agree that this company is not responsible for any delays caused by the unavailability of parts, shipping delays or production scheduling. An express mechanics lien is hereby acknowledged on the above described vehicle by Auto Service Auto Body to secure the amount of repairs thereto. Please remove all personal items from your vehicle. Auto Service Auto Body is not responsible for any items left in vehicle. If your vehicle is deemed to be a total loss, please be advised that there will be an administrative charge of Two Hundred and Fifty Dollars (\$250.00). TERMS: The total amount of the repair charges must be paid in full before the vehicle can be released. VISA and M/C not to exceed \$500.00, personal checks must be pre-approved. Due to the complexity of the repair and the quality of work required, we are unable to always guarantee a specific delivery time. I hereby assign any and all right to reimbursement to Auto Service Auto Body for any discrepancy in the labor rate, paint and material worksheet and or mechanical labor rate paid to repair my vehicle.

I REQUEST THAT PAYMENT BE ISSUED DIRECTLY TO AUTO SERVICE AUTO BODY FOR THE REPAIRS COMPLETED ON THE ABOVE DESCRIBED CLAIM. (05-0398794)

SIGNED _____ DATE _____