

Repair Order

Shop Name & Logo | Address | Phone | Email | Website

REPAIR ORDER INFO

RO Number	Date In	Promised Date
_____	_____	_____

CUSTOMER

Customer Name	Phone
_____	_____
Email	Address
_____	_____

VEHICLE

Year	Make	Model
_____	_____	_____
VIN	License Plate	Mileage In
_____	_____	_____

CUSTOMER CONCERN / COMPLAINT

LABOR

Service / Description	Hours	Rate	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PARTS

Part Name / Number	Qty	Unit Price	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

	Labor Total	_____
	Parts Total	_____
	Tax	_____
	Grand Total	_____

Authorization

I authorize the above described repairs and the charges set forth herein. I acknowledge that I have read and agree to the terms on the reverse side of this form. I understand that I will be responsible for payment upon completion of work.

Customer Signature

Date
