Body Shop Estimate

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

ESTIMATE INFO

Estimate #	Date	Valid until	Estimator

CUSTOMER & INSURANCE

Customer Name	Phone	Email

Insurance company (if claim)	Claim #	Adjuster / phone	Deductible $

VEHICLE

Year	Make	Model	Color / paint code

VIN	License Plate	Mileage	Point of impact

DAMAGE DESCRIPTION

PARTS (OEM / AFTERMARKET / USED / RECYCLED)

Panel / Part	Part #	Type	Qty	Price

LABOR BY OPERATION (HRS × RATE)

Operation (R&I, repair, replace, blend, refinish)	Body hrs	Paint hrs	Mech hrs	Amount

PAINT & MATERIALS, SUBLET, OTHER

Item	Basis	Amount

TOTALS

Parts	
Body labor	
Paint labor	
Mechanical labor	
Paint & materials	
Sublet	
Tax	
Estimate Total	

This is an estimate based on visible damage. Hidden damage found after teardown will be documented in a supplement and approved by the customer and, if applicable, the insurer before work continues. Prices valid until the date above.

AUTHORIZATION TO PROCEED

I authorize the repairs described above and any supplement I approve in writing.

Customer Signature	Date	Estimator Signature