**COLLISION REPAIR ESTIMATE**

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**Estimate Date Estimate Number Work Order**

|  |  |  |
| --- | --- | --- |
| **Prepared By** |  | **Prepared For** |

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Company Client**

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Address Address**

|  |  |  |
| --- | --- | --- |
|  |  |  |

**City, State, Zip City, State, Zip**

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**Phone, Email Phone, Email**

**Service Summary**

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**Notes / Terms and Conditions:**

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**Estimated Cost** **$**

 **(Plus Applicable Taxes)**