

Standard Repair Estimate Form

Customer Name

Phone Number

Date

Address

Equipment / Model

Serial Number

Received By

Problem Description

Repair Estimate

Part / Service	Qty	Unit Cost	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal			<input type="text"/>
Tax			<input type="text"/>
Total Estimate			<input type="text"/>

Part / Service	Qty	Unit Cost	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal			<input type="text"/>
Tax			<input type="text"/>
Total Estimate			<input type="text"/>

Remarks / Recommendations

Technician Signature

Customer Approval Signature