

REF # \_\_\_\_\_

# ROYAL AUTO BODY



OF PLANO

600 Ohio Drive, Plano, TX 75093

Claims: 972-838-0856

(For Official Purpose)

Office: 972-922-9222

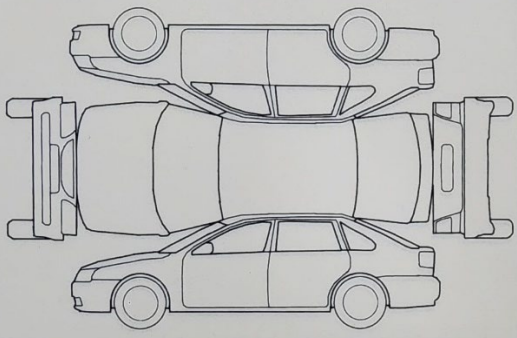
[RoyalAutoBodyRepair@yahoo.com](mailto:RoyalAutoBodyRepair@yahoo.com)

[RoyalAutoBodyofPlano@gmail.com](mailto:RoyalAutoBodyofPlano@gmail.com)

CUSTOMER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ ALTERNATE: \_\_\_\_\_  
 EMAIL ID: \_\_\_\_\_  
 MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_  
 MILEAGE: \_\_\_\_\_ LICENSE: \_\_\_\_\_ STATE: \_\_\_\_\_  
 EXT COLOR: \_\_\_\_\_ INT COLOR: \_\_\_\_\_

DATE OF LOSS: \_\_\_\_\_  
 TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_  
 INSURANCE CO: \_\_\_\_\_  
 POLICY #: \_\_\_\_\_  
 CLAIM#: \_\_\_\_\_  
 AGENT#: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 DEDUCTIBLE: \_\_\_\_\_ WAIVED: \_\_\_\_\_  
 PRE-APPROVED AMOUNT: \_\_\_\_\_  
 REVISED ESTIMATE: \_\_\_\_\_

Vehicle Identification Number																				
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	<p><b>DAMAGE</b></p> <p>C - Chips          D1 - Dents          D2 - Dings          G - Glass          M - Missing          S - Scratch          PD - Previous Damage</p>  <p>(For Official Purpose)</p>
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CUSTOMER CONCERNS:

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By Signing customer is: Authorizing Royal Auto Body Repair to have their vehicle repaired. Allowing their vehicle to be driven for testing and driven from location to location as necessary. In the event of the deductible being waived, Royal Auto Body Repair may or may not use non-OEM parts in order to bring savings to the customer. Absolving Royal Auto Body Repair of any responsibility for any lost items and damage due to theft, fire, or acts of nature. Customer is responsible for pick up of vehicle after repairs within 3 days. After 3 days, there is a \$85 charge per day to cover storage fees.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CUSTOMER HAS INSPECTED AND PICKED UP VEHICLE

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Parts:	_____
Price Adj to Invoice	_____
Labor Hrs	_____
Shop Supplies	_____
Paint Hrs	_____
Towing/Storage	_____
Miscellaneous	_____
EPA/Wate Disposal	_____
<b>TOTAL</b>	_____

ADDITIONAL COMMENTS:

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