COLLISION REPAIR ORDER

Auto body repair with new, used, reconditioned and OEM parts listed line by line

Repair facility		**RO #**	
Customer		**Date / time opened**	
Vehicle		**VIN / plate**	
Insurance / claim #		**Odometer in / out**	

Damage / customer concern

PARTS (type: New / Used / Reconditioned / OEM)

Part / description	Part type	Qty	Unit price	Amount

LABOR

Labor / service (body, paint, frame)	Hours	Rate	Amount

Parts subtotal		**Labor subtotal**	
Paint / materials		**Tax (if applicable)**	
Total		**Deductible / balance**	

Original authorization	Customer name / signature	Date / time	Method
Added-work authorization	Approved by (name)	Date / time	Phone / email / in person
Added parts / labor		Additional amount	

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