



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects

1-888-DASH-2-DOT

(1-888-327-4236)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository ☐

07-MAY-2008

Reference No.

2008 JUN 26 AM 8:44

10226913

OWNER INFORMATION (Type or Print)

Name

Address

City

PATCHOGUE

State

NY

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO

In the absence of an authorized signature, please print name or address to the vehicle manufacturer.

Signature of Owner

Date 6/18/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

JTHBJ46G882170283

JTHBJ46G882

Make

LEXUS

Model

ES350

Model Year

2008

Date Purchased

11-9-08

Dealer's Name and Telephone Number

LEXUS OF SMTHTOWN

(631) 360-3200

Engine:

No: Cylinders

Fuel Type:

SUPER

Original Owner

☒

Dealer's City

SMTHTOWN

700 EAST

JERICHO TURNPIKE

State

NY

Zip Code

11780

6

UNLEADED

Transmission Type

☒

Antilock Brakes

Powertrain

AUTOMATIC

☒

Cruise Control

Vehicle Component Code

180000 VEHICLE SPEED CONTROL

UNKNOWN

Multiple Failure:

UNKNOWN

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

27-MAR-2008

Failure Mileage

4200

Failure Speed

UNKNOWN

UNEXPECTED ACCELERATION

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash

☒ Yes ☐ No

Fire

☐ Yes ☒ No

Number of Persons Injured

1

Number of Deaths

0

Reported to Police

Y

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

TL*THE CONTACT OWNS A 2008 LEXUS ES350. ON MARCH 27, 2008, WHILE DRIVING 5 MPH, THE CONTACT HEARD A HIGH PITCHED SOUND COMING FROM THE ENGINE. A SECOND LATER, SHE HEARD A ROARING NOISE LIKE THAT OF A ROCKET SHIP COMING FROM THE ENGINE. THE VEHICLE IMMEDIATELY ACCELERATED ON ITS OWN AND STOPPED WHEN IT CRASHED INTO A TREE. THE VEHICLE IS CURRENTLY AT THE COLLISION SHOP. THE INSURANCE COMPANY DID NOT PROVIDE A REPORT FOR THE CAUSE OF THE FAILURE. THE CONTACT SUSTAINED SERIOUS INJURIES TO HER LEGS. A POLICE REPORT WAS FILED. THE FAILURE MILEAGE WAS 4,200. 4242. THE CAR REPAIRMAN FEELS THAT THE CAR WAS APPARENTLY AIRBORNE WHEN IT HIT THE TREE. MY INJURIES ARE: DEEP VEIN THROMBOSIS, LEFT LEG; HEMATOMAS AND CONTUSIONS, BOTH LEGS; SKIN GRAFT IN LEFT LEG WOUND; CMC ALGINATE DRESSING WITH ANTIMICROBIAL SILVER IN RIGHT LEG WOUND; COUMADIN LONG TERM THERAPY 15mg, DAILY. NEEDS WHEEL CHAIR AND WALKER. PLEASE SEE REVERSE SIDE, ->

Include, if available: (Police/Fire Department Report, Photos and Repair Invoice).

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

ATTACHED PLEASE FIND POLICE ACCIDENT REPORT AND
"REPORT OF MOTOR VEHICLE ACCIDENT" (NEW YORK STATE);
ALSO, THE REPAIR INVOICE AND PHOTOS OF THE
DAMAGED LEXUS ES 350, year 2008. ALSO, PHOTOS OF MY
INJURED LEGS; GIORDANO'S COLLISION Repair mechanic states
the cause of the CRASH WAS the ELECTRONIC WIRE ACCELERATOR.
OLD PARTS ARE NOT AVAILABLE. Shop mechanics repaired
the damaged car.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL

PERMIT NO. 1888

WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Ave SE
Washington, DC 20077-9382



Think your vehicle
has a safety defect?



If so,
use the enclosed
form to file a report.

or visit:

www.safercar.gov

or call:

Vehicle Safety Hotline

888-327-4236

For more information, visit the National Highway Traffic Safety Administration website at www.safercar.gov

[REDACTED]
Patchogue NY [REDACTED]
June 22, 2008

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NHTSA-210
1200 New Jersey Avenue SE
Washington, DC 20077-9382

On March 27, 2008, I had a
car crash and reported it ^{by phone,} to your
Department; case ^{my} # _____

Enclosed please find the
following:

Vehicle Owner's Questionnaire
Repair Invoice
Police Report
Photos

Please call me if you have further
questions, at home, [REDACTED]

Thank you.

Yours truly,
[REDACTED]

Police Accident
Reports :

March 27, 2008

New York State Department of Motor Vehicles
POLICE ACCIDENT REPORTCERTIFIED
CENTRAL RECORDS SECTION
SUFFOLK COUNTY POLICE DEPARTMENT19
41

Local Codes

08-155354

MV-104A (6/04)

☐ AMENDED REPORT

DMV COPY

1	Accident Date Month: 03, Day: 27, Year: 08	Day of Week TH	Military Time 1450	No. of Vehicles 01	No. Injured 01	No. Killed 0	Not Investigated at Scene ☐	Left Scene ☐	Police Photos ☐ Yes ☐ No	20
VEHICLE 1 Driver: [Redacted] License ID Number: [Redacted] Driver Name: [Redacted] Address: [Redacted] City/Town: [Redacted] State: NY, Zip Code: [Redacted] VEHICLE 2 Driver: [Redacted] License ID Number: [Redacted] Driver Name: [Redacted] Address: [Redacted] City/Town: [Redacted] State: NY, Zip Code: [Redacted]										21
Date of Birth: [Redacted], Sex: F, Unlicensed: ☐, No. of Occupants: 01, Public Property Damaged: ☐ Date of Birth: [Redacted], Sex: [Redacted], Unlicensed: ☐, No. of Occupants: [Redacted], Public Property Damaged: ☐										22
Name: Driver 1, Date of Birth: [Redacted], Sex: [Redacted], Address: [Redacted], City/Town: [Redacted], State: NY, Zip Code: [Redacted] Name: Driver 1, Date of Birth: [Redacted], Sex: [Redacted], Address: [Redacted], City/Town: [Redacted], State: NY, Zip Code: [Redacted]										23
State of Reg: NY, Vehicle Year & Make: 08 Lexus, Vehicle Type: 4DR PSS, Ins. Code: 357 State of Reg: [Redacted], Vehicle Year & Make: [Redacted], Vehicle Type: [Redacted], Ins. Code: [Redacted]										24
Ticket/Arrest Number(s): [Redacted] Violation Section(s): [Redacted]										25
Check if involved vehicle is: ☐ more than 95 inches wide; ☐ more than 34 feet long; ☐ operated with an overweight permit; ☐ operated with an overdimension permit. Check if involved vehicle is: ☐ more than 95 inches wide; ☐ more than 34 feet long; ☐ operated with an overweight permit; ☐ operated with an overdimension permit. Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.										26
VEHICLE 1 DAMAGE CODES Box 1 - Point of Impact: [Redacted] Box 2 - Most Damage: [Redacted] Enter up to three more Damage Codes: [Redacted] VEHICLE 2 DAMAGE CODES Box 1 - Point of Impact: [Redacted] Box 2 - Most Damage: [Redacted] Enter up to three more Damage Codes: [Redacted] ACCIDENT DIAGRAM 										27
VEHICLE DAMAGE CODING: 1-13. SEE DIAGRAM ON RIGHT. 14. UNDERCARRIAGE 17. DEMOLISHED 15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER										28
Place Where Accident Occurred: County: Suffolk, City: Farmingville, Brookham Road on which accident occurred: Parking lot of 2410 CR23 (Route Number or Street Name) at 1) intersecting street: _____ (Route Number or Street Name) or 2) _____ of _____ (Milepost, Nearest intersecting Route Number or Street Name)										29
Accident Description/Officer's Notes: Above complainant reports while attempting to park vehicle in parking slot, the vehicle "jumped forward while the engine revved" causing the accident.										30

8	9	10	11	12	13	14	15	16	17	BY	TO	18	Names of all involved	Date of Death Only
A	1	1	4	1		11	10	6	9553	5716				
B														
C														
D														
E														
F														

Officer's Rank and Signature Print Name in Full: Edward Ramirez	Badge/ID No.: 5297	NCIC No.: 0501	Precinct/Post Troop/Zone: 610	Station/Beat/Sector: 618	Reviewing Officer: SGT 916	Date/Time Reviewed: 3/28/08
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56LDEN NY 11784



POLICE DEPARTMENT, COUNTY OF SUFFOLK, N.Y.
ACCREDITED LAW ENFORCEMENT AGENCY
MOTOR VEHICLE CRASH SUPPLEMENT REPORT
53-0207:: 03/07kd
PDCS-1010c

CENTRAL COMPLAINT NO. 06-155354
DATE OF MVC 3/27/08 PCT. 6 COMMAND 610 SECTOR 618 GRID

WITNESSES	D.O.B.	CITY	STATE	SEX	STATEMENT
					YES NO
		<u>Patchogue, NY</u>		<u>M</u>	☒ YES ☐ NO
					☐ YES ☐ NO
					☐ YES ☐ NO
					☐ YES ☐ NO
					☐ YES ☐ NO

USE ONLY BLACK INK
STATEMENTS OF INVOLVED DRIVERS AND WITNESSES

☒ DRIVER ☐ PASSENGER ☐ OTHER WITNESS

I, [REDACTED] do hereby make the following statement:

I am [REDACTED] years of age. I was born on (date) [REDACTED]

I reside at [REDACTED]

Patchogue, NY

My home telephone number is [REDACTED]

(OPTIONAL)

On (date of MV Crash) 3/27/08 at (time) 2:35 I (witness statement)

While attempting to park in the parking lot of Teachers Federal Credit Union while backing I heard a high pitch noise under the hood and the car and the engine lurched forward at an unbelievably high speed that I could not stop.

Check one of the following:

☒ I have read the above statement consisting of 1 page(s) and I swear that it is the truth.

☐ I had the above statement read to me by [REDACTED] and I swear that it is the truth.

FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW, STATE OF NEW YORK.

X

SIGNATURE

3/27/08
DATE

WITNESSED

SIGN HERE	OFFICER'S RANK AND NAME <u>PO 5757/6012</u>	BADGE NO. <u>5757</u>	COMMAND <u>60</u>	REVIEWING OFFICER'S RANK AND NAME <u>SGT 114/61014</u>	DATE <u>3/28/08</u>
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PEDESTRIAN/BICYCLIST/OTHER PEDESTRIAN LOCATION				APPARENT CONTRIBUTING FACTORS				Vehicular			
1. Pedestrian/Bicyclist/Other Pedestrian at Intersection 2. Pedestrian/Bicyclist/Other Pedestrian Not at Intersection				Human 2. Alcohol Involvement 3. Backing Unsafely 4. Driver Inattention/Distracted 5. Driver Inexperience 6. Drugs (Illegal) 7. Failure to Yield Right-of-Way 27. Failure to Keep Right 21. Fatigued/Drowsy 8. Fell Asleep 9. Following Too Closely 10. Illness 11. Lost Consciousness 12. Passenger Distraction 13. Passing or Lane Usage Improper 14. Pedestrian/Bicyclist/Other Pedestrian Error/Confusion 15. Physical Disability 16. Prescription Medication 17. Traffic Control Disregarded 18. Turning Improperly 19. Unsafe Speed 20. Unsafe Lane Changing 22. Cell Phone (hand-held) 23. Cell Phone (hands-free) 24. Other Electronic Device 25. Outside Car Distraction 26. Reaction to Other Uninvolved Vehicle 28. Aggressive Driving/Road Rage				41. Accelerator Defective 42. Brakes Defective 43. Headlights Defective 44. Other Lighting Defects 45. Oversized Vehicle 46. Steering Failure 47. Tire Failure/Inadequate 48. Tow Hitch Defective 49. Windshield Inadequate 50. Driverless/Runaway Vehicle 60. Other Vehicular Environmental 61. Animal's Action 62. Glare 63. Lane Marking Improper/Inadequate 64. Obstruction/Debris 65. Pavement Defective 66. Pavement Slippery 67. Shoulders Defective/Improper 68. Traffic Control Device Improper/Non-Working 69. View Obstructed/Limited			
PEDESTRIAN/BICYCLIST/OTHER PEDESTRIAN ACTION 1. Crossing, With Signal 2. Crossing, Against Signal 3. Crossing, No Signal, Marked Crosswalk 4. Crossing, No Signal or Crosswalk 5. Riding/Walking/Skating Along Highway With Traffic 6. Riding/Walking/Skating Along Highway Against Traffic 7. Emerging from in Front of/Behind Parked Vehicle 8. Going to/From Stopped School Bus 9. Getting On/Off Vehicle Other Than School Bus 11. Working in Roadway 12. Playing in Roadway 13. Other Actions in Roadway * 14. Not in Roadway (Indicate) *				TRAFFIC CONTROL 1. None 2. Traffic Signal 3. Stop Sign 4. Flashing Light 5. Yield Sign 6. Officer/Guard 7. No Passing Zone 8. RR Crossing Sign 9. RR Crossing Flashing Light 10. RR Crossing Gates 11. Stopped School Bus-Red Lights Flashing 12. Construction Work Area 13. Maintenance Work Area 14. Utility Work Area 15. Police/Fire Emergency 16. School Zone 20. Other *				VEHICLE INFORMATION Vehicle 1 19 Vehicle 1 20 Vehicle 2 21 Vehicle 2 22 Vehicle 1 23 Vehicle 2 24 Vehicle 1 25 Vehicle 2 26 Vehicle 1 29 Vehicle 2 30			
LIGHT CONDITIONS 1. Daylight 2. Dawn 3. Dusk 4. Dark-Road Lighted 5. Dark-Road Unlighted				ROADWAY CHARACTER 1. Straight and Level 2. Straight and Grade 3. Straight at Hillcrest 4. Curve and Level 5. Curve and Grade 6. Curve at Hillcrest				ROADWAY SURFACE CONDITION 1. Dry 2. Wet 3. Muddy 4. Snow/Ice 5. Slush 6. Flooded 0. Other *			
WEATHER 1. Clear 2. Cloudy 3. Rain 4. Snow 5. Sleet/Hail/Freezing Rain 6. Fog/Smog/Smoke 0. Other *				WHICH VEHICLE OCCUPIED 1. Vehicle No. 1 2. Vehicle No. 2 A. All-Terrain Vehicle (ATV) B. Bicyclist C. In-Line Skater O. Other * P. Pedestrian S. Snowmobiler				LOCATION OF MOST SEVERE PHYSICAL COMPLAINT 1. Head 2. Face 3. Eye 4. Neck 5. Chest 6. Back 7. Shoulder-Upper Arm 8. Elbow-Lower Arm-Hand 9. Abdomen - Pelvis 10. Hip-Upper Leg 11. Knee-Lower Leg-Foot 12. Entire Body			
POSITION IN/ON VEHICLE 1. Driver 2-7. Passengers 8. Riding/Hanging on Outside				SAFETY EQUIPMENT USED 1. None 2. Lap Belt 3. Harness 4. Lap Belt/Harness 5. Child Restraint Only 6. Helmet (Motorcycle Only) 7. Air Bag Deployed 8. Air Bag Deployed/Lap Belt 9. Air Bag Deployed/Harness A. Air Bag Deployed/Lap Belt/Harness B. Air Bag Deployed/Child Restraint C. In-Line Skater/Bicyclist D. Helmet Only E. Pads Only F. Stoppers Only 0. Other *				EJECTION FROM VEHICLE 1. Not Ejected 2. Partially Ejected 3. Ejected			
TYPE OF PHYSICAL COMPLAINT 1. Amputation 2. Concussion 3. Internal 4. Minor Bleeding 5. Severe Bleeding 6. Minor Burn 7. Moderate Burn 8. Severe Burn 9. Fracture - Dislocation 10. Contusion - Bruise 11. Abrasion 12. Complaint of Pain 13. None Visible 14. Whiplash				VICTIM'S PHYSICAL AND EMOTIONAL STATUS 1. Apparent Death 2. Unconscious 3. Semiconscious 4. Incoherent 5. Shock 6. Conscious				LOCATION OF FIRST EVENT 1. On Roadway 2. Off Roadway			
TYPE OF ACCIDENT - COLLISION WITH 1. Other Motor Vehicle 2. Pedestrian 3. Bicyclist 4. Animal 5. Railroad Train 6. In-Line Skater 7. Deer 8. Other Pedestrian 10. Other Object (Not Fixed)				COLLISION WITH FIXED OBJECT 11. Light Support/Utility Pole 12. Guide Rail-Not At End 25. Guide Rail-End 13. Crash Cushion 14. Sign Post 15. Tree 16. Building/Wall 17. Curbing 18. Fence 19. Bridge Structure 20. Culvert/Head Wall 21. Median-Not At End 26. Median-End 27. Barrier 22. Snow Embankment 23. Earth Embankment/Rock Cut/Ditch 24. Fire Hydrant 30. Other Fixed Object*				NO COLLISION 31. Overturned 32. Fire/Explosion 33. Submersion 34. Ran Off Roadway Only 40. Other*			
INJURED TAKEN 17 BY TO 18				COVER SHEET N							

POLICE DEPARTMENT, COUNTY OF SUFFOLK, N.Y.
ACCREDITED LAW ENFORCEMENT AGENCY
FIELD REPORT PDCS-1053b

CENTRAL COMPLAINT NUMBER 08-155354		PCT. OF OCC. 6	SECTOR 610	CAR NO. 618	HAMLET Farmingville
INCIDENT Vehicle MVA MPI Private tow					
INCIDENT LOCATION (INCLUDE BUSINESS NAME) Teachers Federal Credit Union Perkins lot					
DAY TH	DATE 3/27/08	TIME 1455	DAY	DATE	TIME
COMPLAINANT OR VICTIM [REDACTED]			PT C	DATE OF BIRTH	☐ M ☐ F
ADDRESS [REDACTED]			TELEPHONE		
ADDITIONAL PERSON 0			PT	DATE OF BIRTH	☐ M ☐ F
ADDRESS			TELEPHONE		
VEH. YR. 08	MAKE Lexus	MODEL 4DR TCU	COLOR TCU	STYLE Pers	REGISTRATION [REDACTED]
QUAN	TYPE	DESCRIPTION	VALUE	TT#	

DETAILS:
NYDL# [REDACTED] exp 8/20/10 NY Reg exp 9/12/09
ILS 351 Double N Towing

DATE OF REPORT 3/27/08	TIME OUT 1433	TIME ARRIVED 1450	TIME IN	TOUR 713	FOUNDED ☒ YES ☐ NO
☐ ACTIVE	☒ CLOSED (NON-CRIMINAL ONLY)	☐ CLEARED BY ARREST		REPORT TO FOLLOW MB104A	
☐ PENDING	☐ EXCEPTIONALLY CLEARED				
POLICE OFFICER Gibson 135757/1010		SUPERVISOR			

Case #

Photos of
Parking lot where
Car crash occurred
March 27, 2008

at Teacher's Federal Credit Union
2410 NORTH OCEAN AVE (Rte 83)
Farmingville, NY 11738

Case #

(Tree)

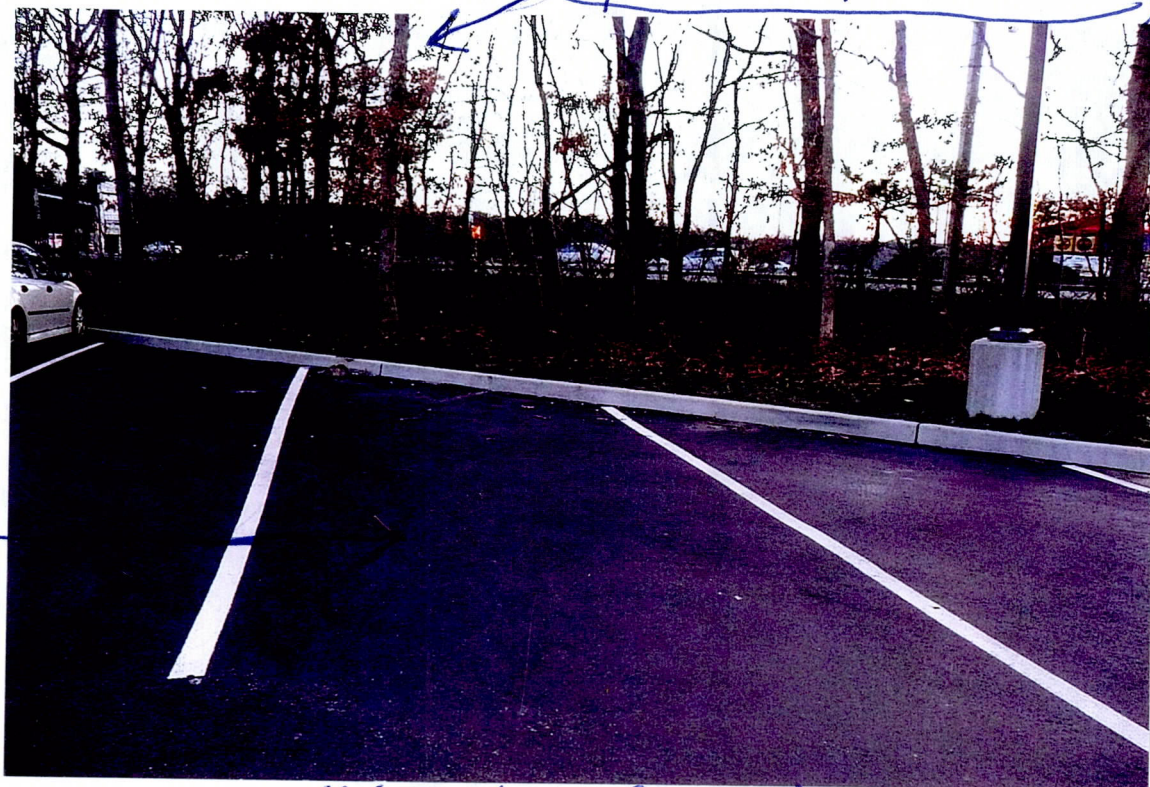


measurement - curb to tree 10' 10"
my parking space

Case #

My car hit this tree

my
parking
space



My Parking space



Parking lot - Teachers Federal Credit Union
2410 North Ocean Avenue
Farmingville, NY 11738

measurement
Curb to tree is 10' 10"

accident date March 27, 2008

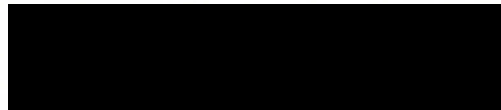
↓ TREE



Parking Space ↓



case #



home phone #

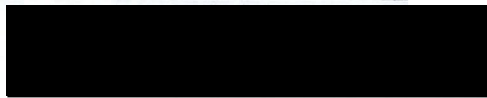


Case #



Photos of car after
Crash - accident date
March 27, 2008

Case #



Accident date, March 27, 2008



Case #

mar. 29,
2008

Right rear
tire was
slashed
during
car
accident
which



occurred on
march 27,
2008



Case #



Phone #



Personal
1

Photos of my leg wounds -

Car accident March 27, 2008 -
air bag deployment caused
the wounds depicted in the
photos attached

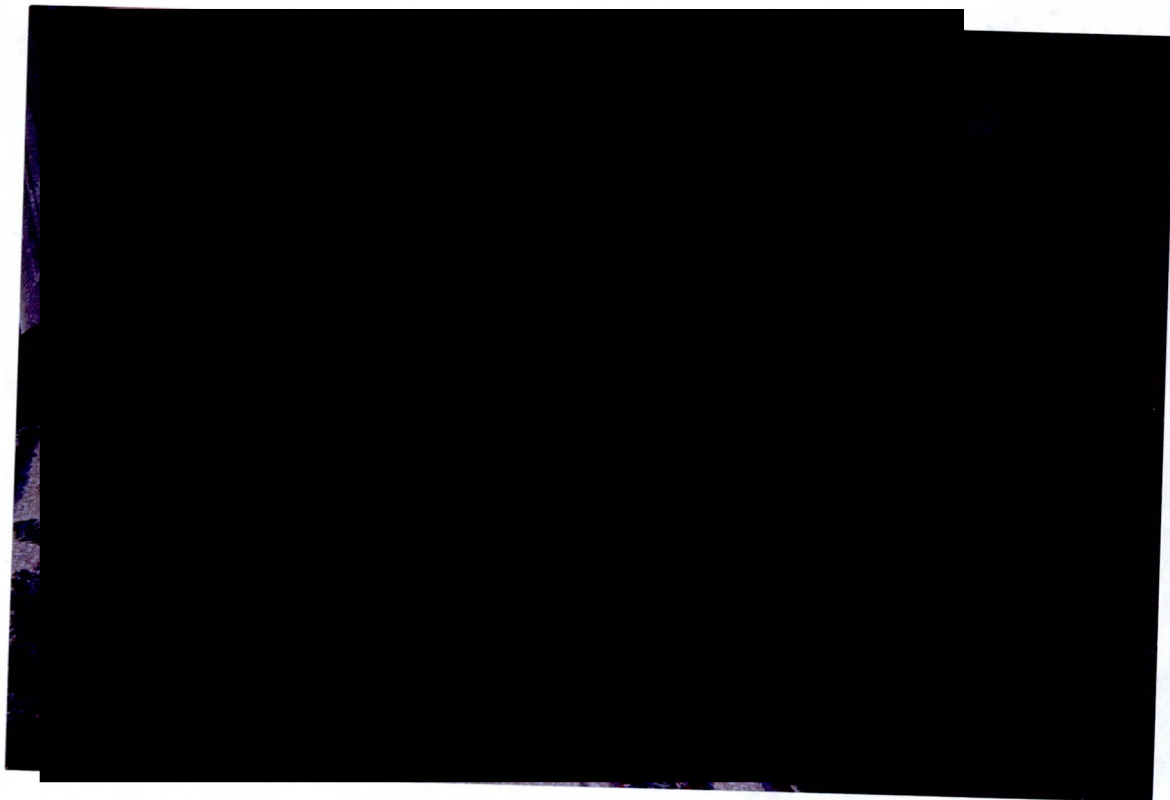
case #

accident date, March 27, 2008

Date of these photos, March 28, 2008

legs,
swollen,
painful

cannot
be
weight
bearing



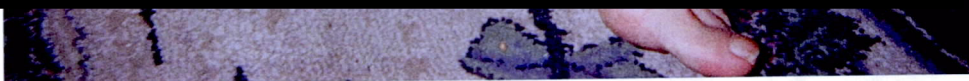
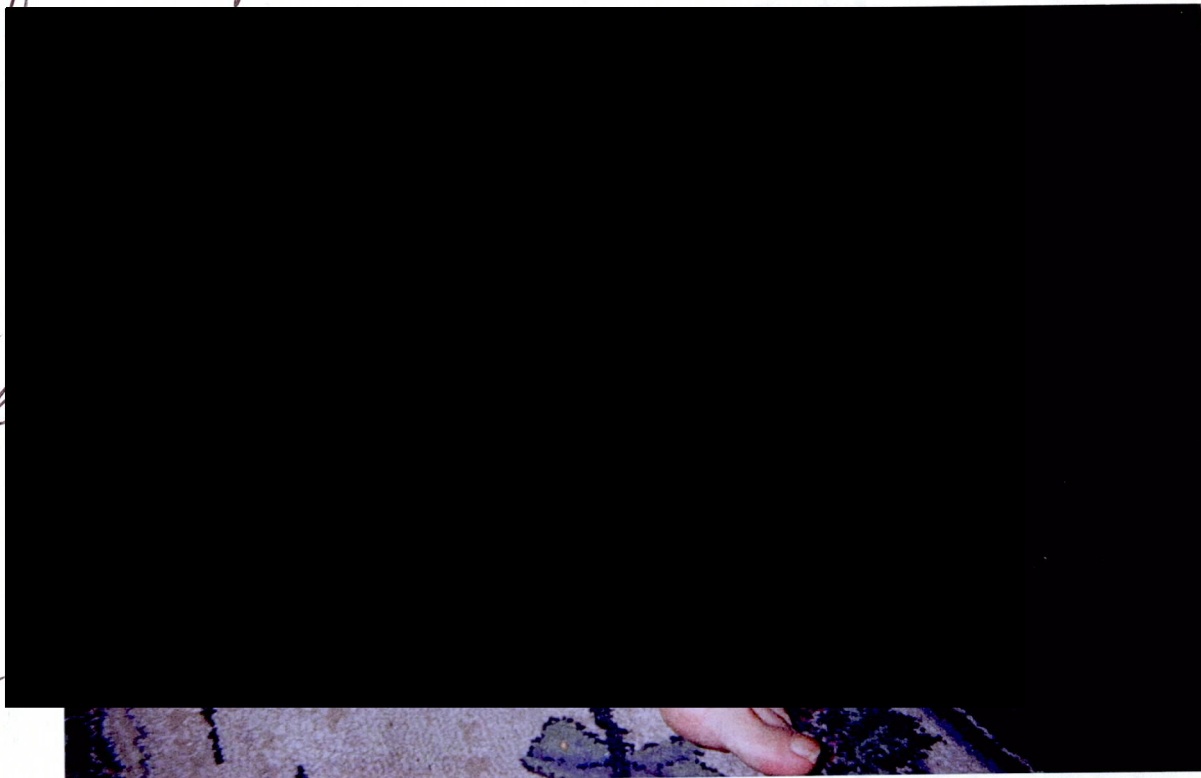
Case #

accident date, march 27, 2008

Date of these photos, march 28, 2008

legs
swollen
painful

Cannot
bear
weight



case #

March
31,
2008

IMG_0331, 3/31/08 2:54 AM, Canon EOS
5D, 1/500, f/5.0, 85mm, ISO 200

IMG_0332, 3/31/08 2:54 AM, Canon EOS
5D, 1/500, f/4.5, 85mm, ISO 250

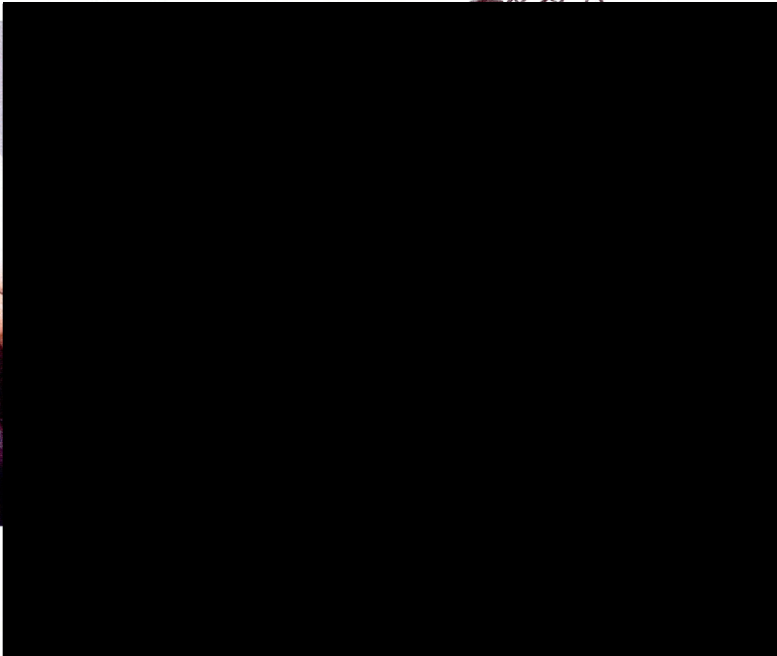
date of car
lent
- 27,
2008

IMG_0333, 3/31/08 2:54 AM, Canon EOS
5D, 1/500, f/3.5, 85mm, ISO 400

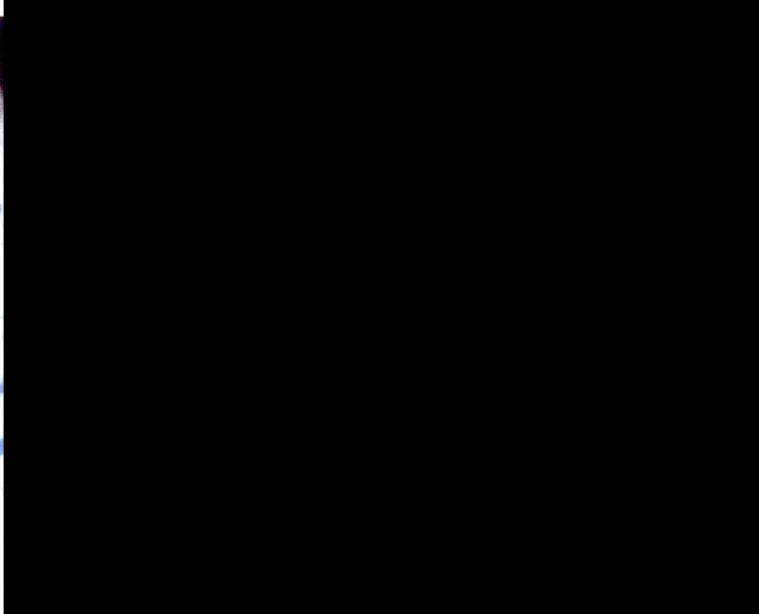
IMG_0334, 3/31/08 2:54 AM, Canon EOS
5D, 1/500, f/4.5, 85mm, ISO 250

Case #
accident date, March 27,
2008

April 5, 2008

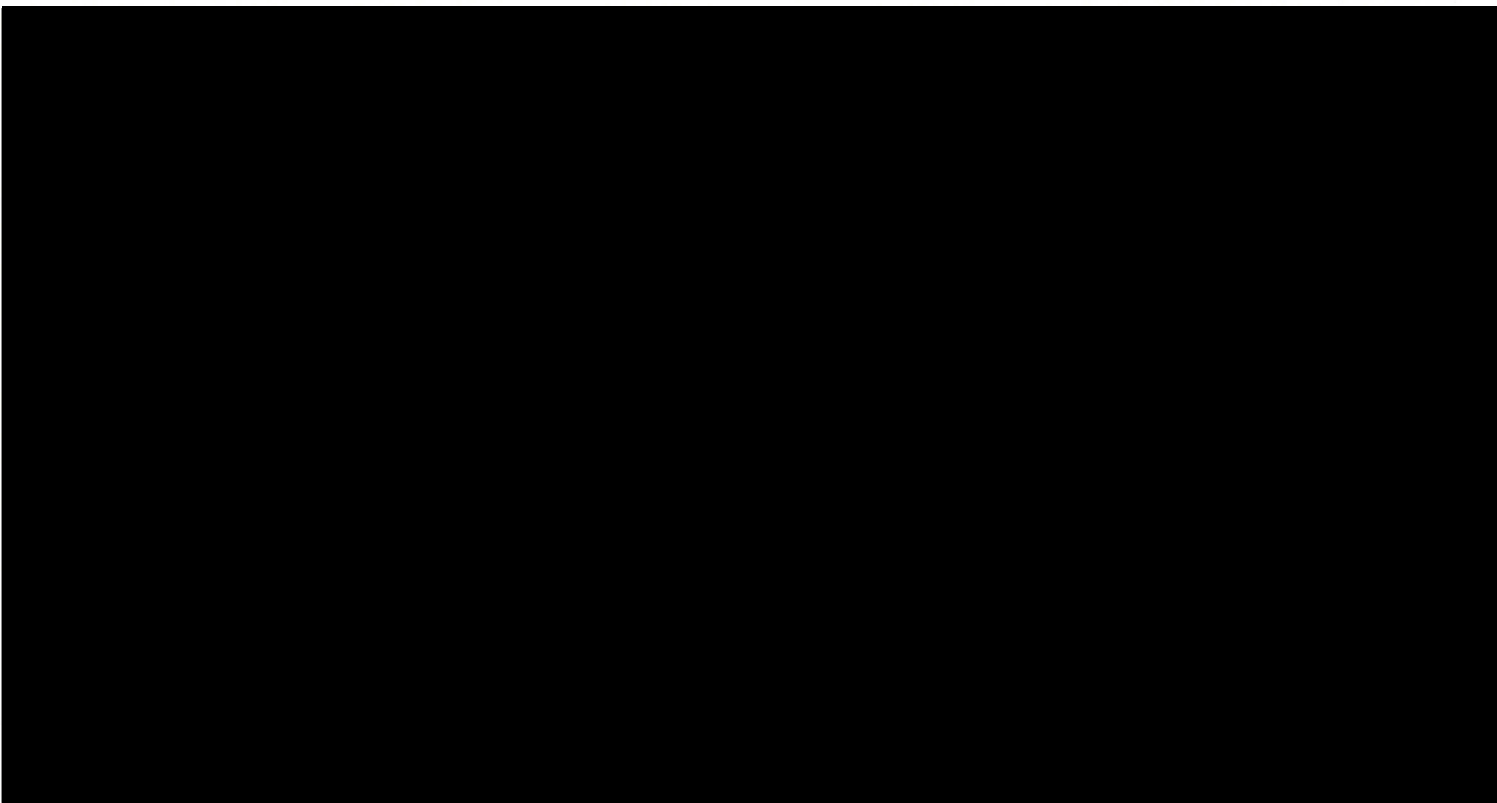


IMG_5500, 4/5/08 3:24 AM, Canon EOS
DIGITAL REBEL XT, 1/60, f/4.0, 32mm,
ISO 400, Flash On



IMG_5501, 4/5/08 3:24 AM, Canon EOS
DIGITAL REBEL XT, 1/60, f/4.5, 51mm,
ISO 400, Flash On

9 days post Lexus car crash
Vascular Surgeon consulted;



APRIL 5, 2008

9 DAYS post Lexus car crash
VASCULAR
SURGEON CONSULTED

IMG_5491, 4/5/08 2:30 AM, Canon EOS
DIGITAL REBEL XT, 1/60, f/5.6, 120mm,
ISO 400, Flash On

IMG_5497, 4/5/08 3:24 AM, Canon EOS
DIGITAL REBEL XT, 1/60, f/4.5, 51mm,
ISO 400, Flash On

Case #

IMG_5498, 4/5/08 3:24 AM, Canon EOS
DIGITAL REBEL XT, 1/60, f/4.0, 41mm,
ISO 400, Flash On

IMG_5499, 4/5/08 3:24 AM, Canon EOS
DIGITAL REBEL XT, 1/60, f/4.0, 32mm,
ISO 400, Flash On

IMG_0359, 4/9/08 2:26 AM, Canon EOS DIGITAL
REBEL XT, 1/60, f/4.0, 18mm, ISO 400, Flash On

IMG_0360, 4/9/08 2:32 AM, Canon EOS DIGITAL
REBEL XT, 1/60, f/4.0, 18mm, ISO 400, Flash On

IMG_0361, 4/9/08 2:32 AM, Canon EOS DIGITAL
REBEL XT, 1/60, f/4.0, 18mm, ISO 400, Flash On

IMG_0362, 4/9/08 2:32 AM, Canon EOS DIGITAL
REBEL XT, 1/60, f/4.0, 18mm, ISO 400, Flash On

date of photos April 24, 2008

Case #

APRIL 24, 2008

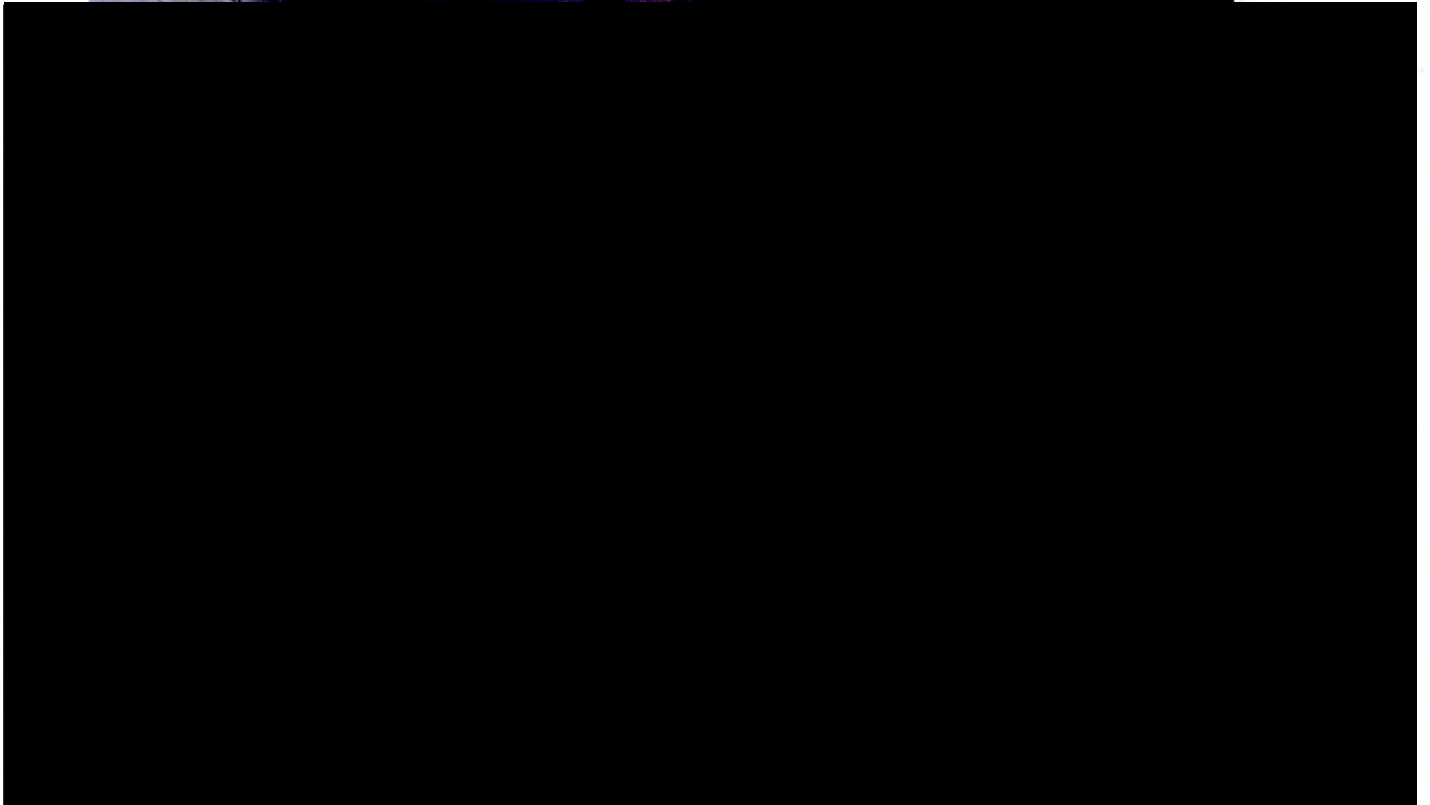
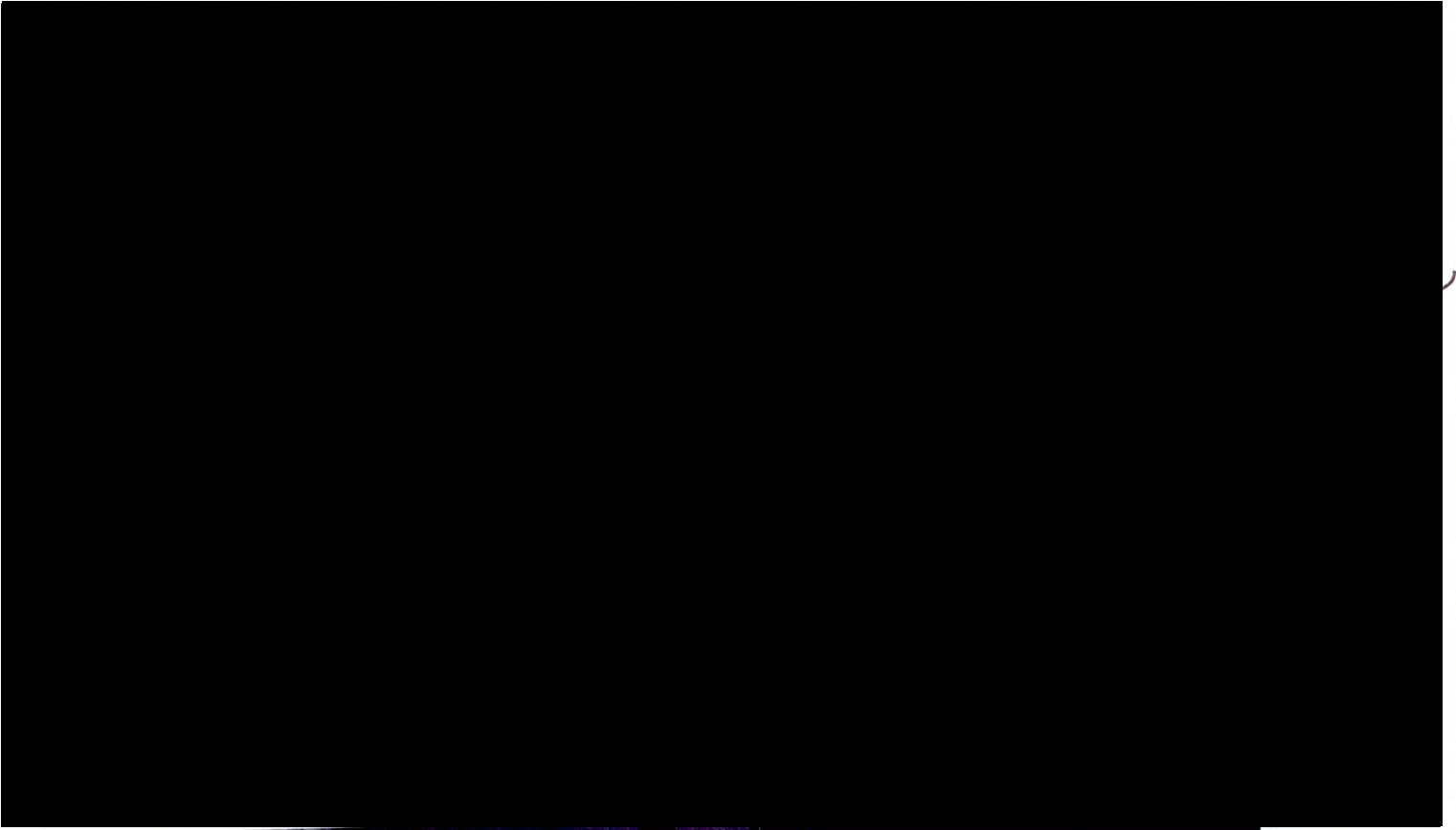
incident date March 27, 2008

MAY 8, 2008

Case#



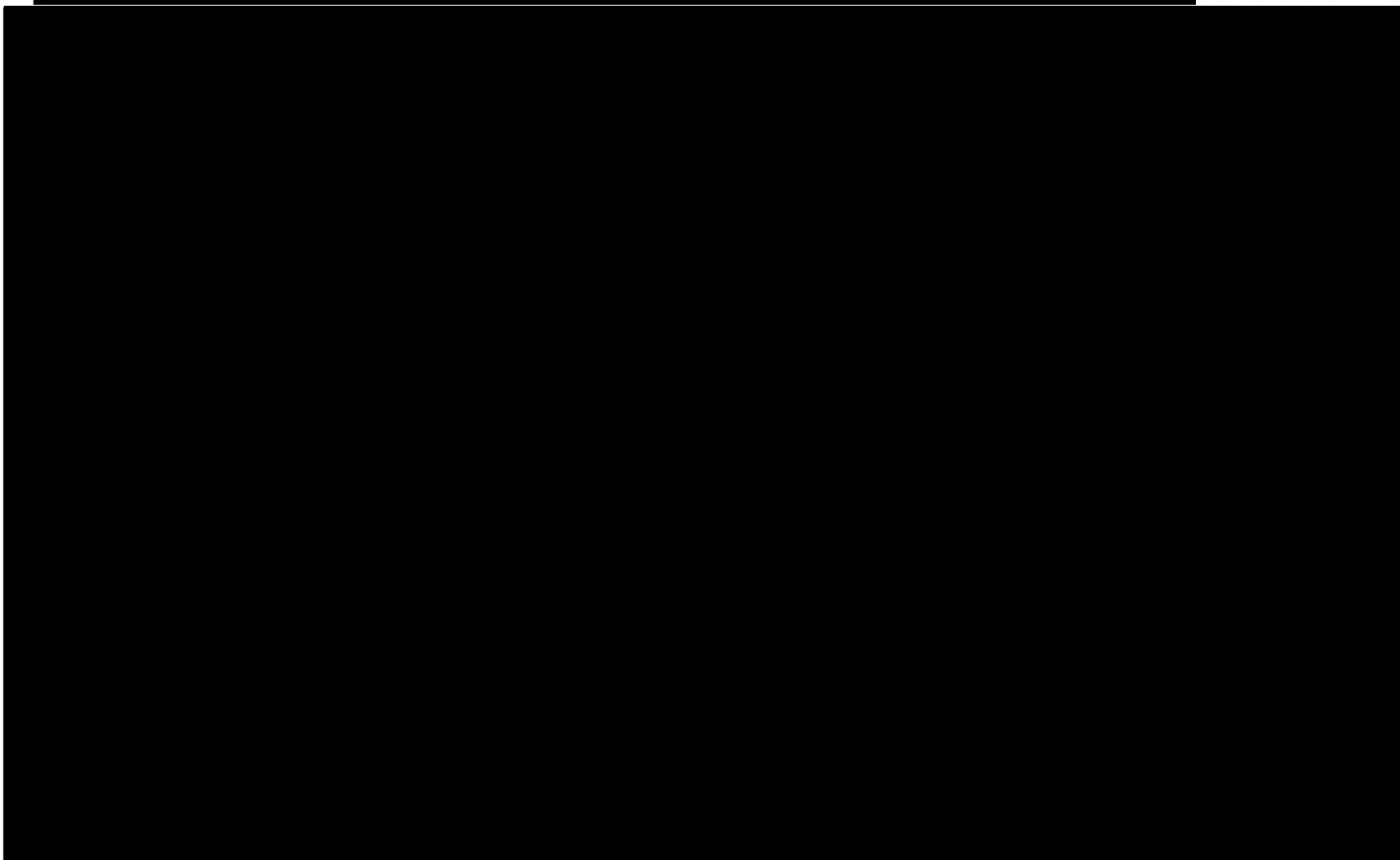
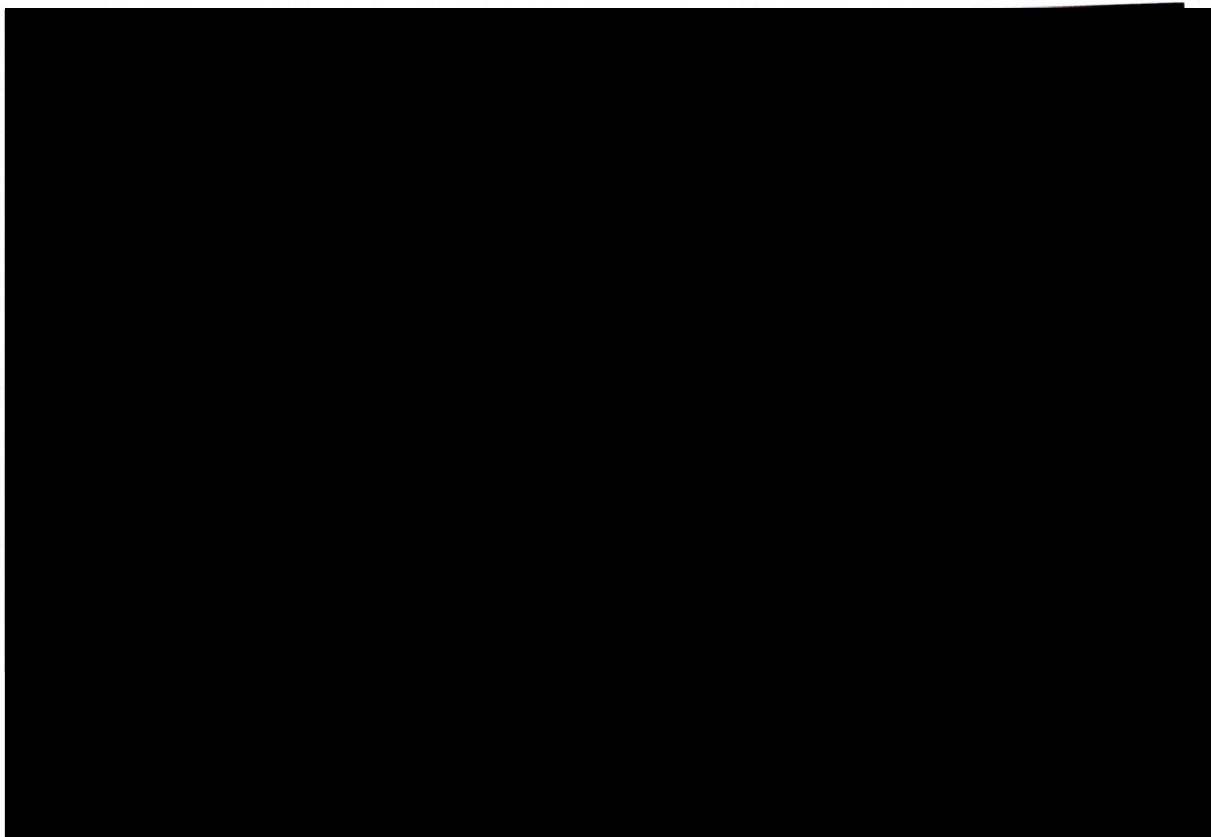
Car accident date, March 27, 2008

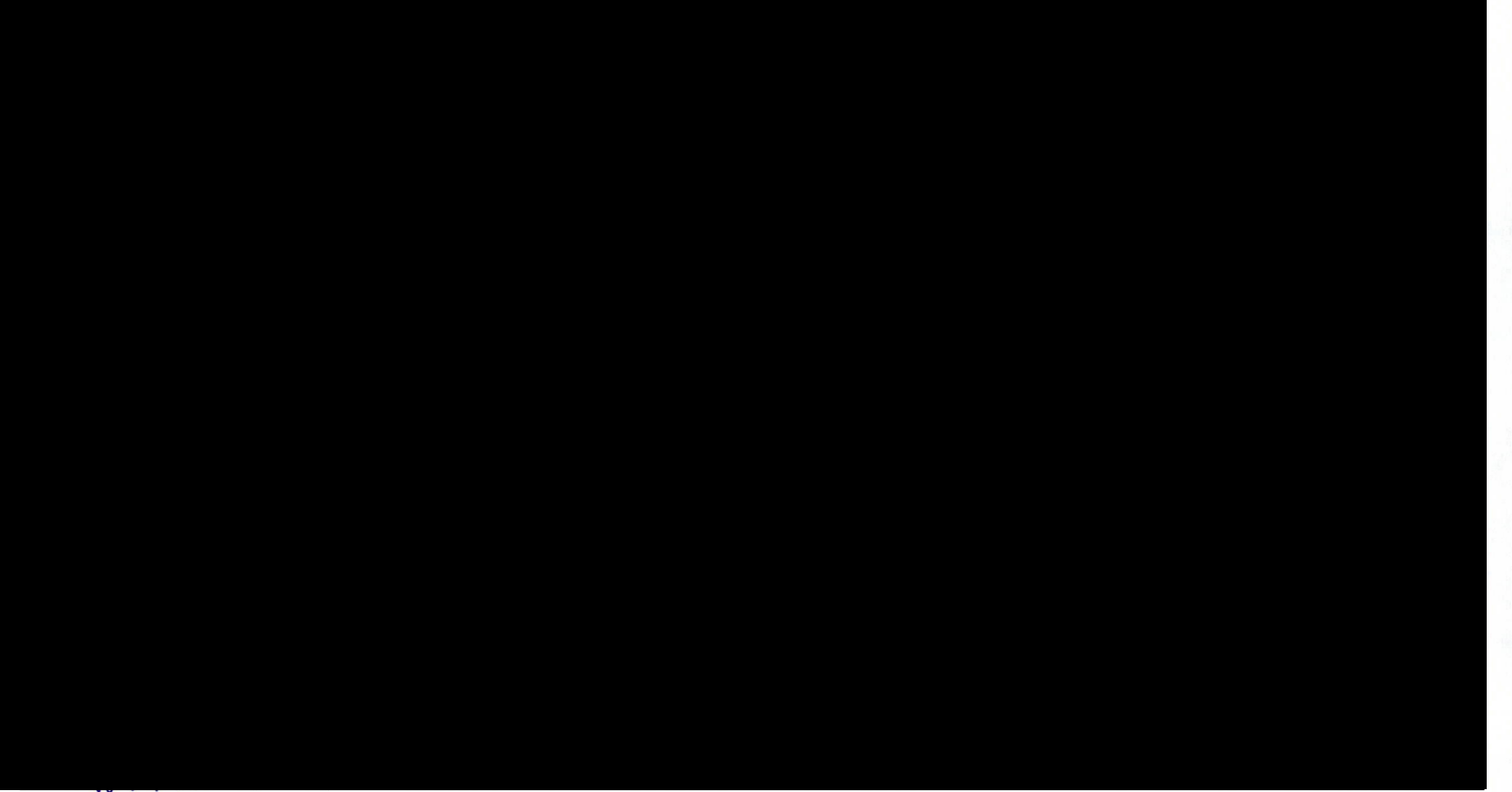


Case #

MAY 29, 2008

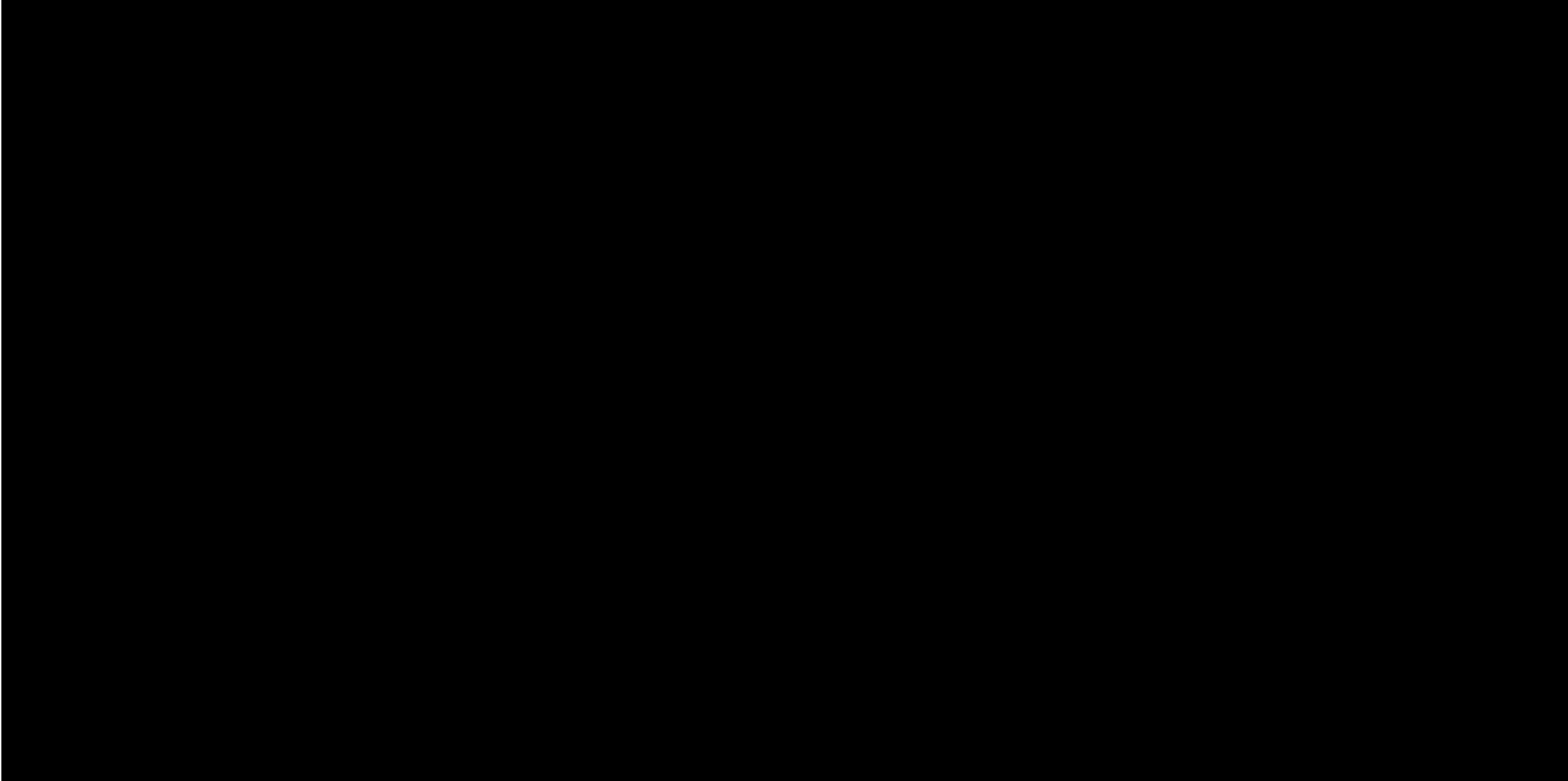
car accident date March 27, 2008





IMG_6052, 6/6/08 3:04 AM, Canon EOS DIGITAL REBEL XT, 1/60,
f/5.6, 135mm, ISO 400, Flash On

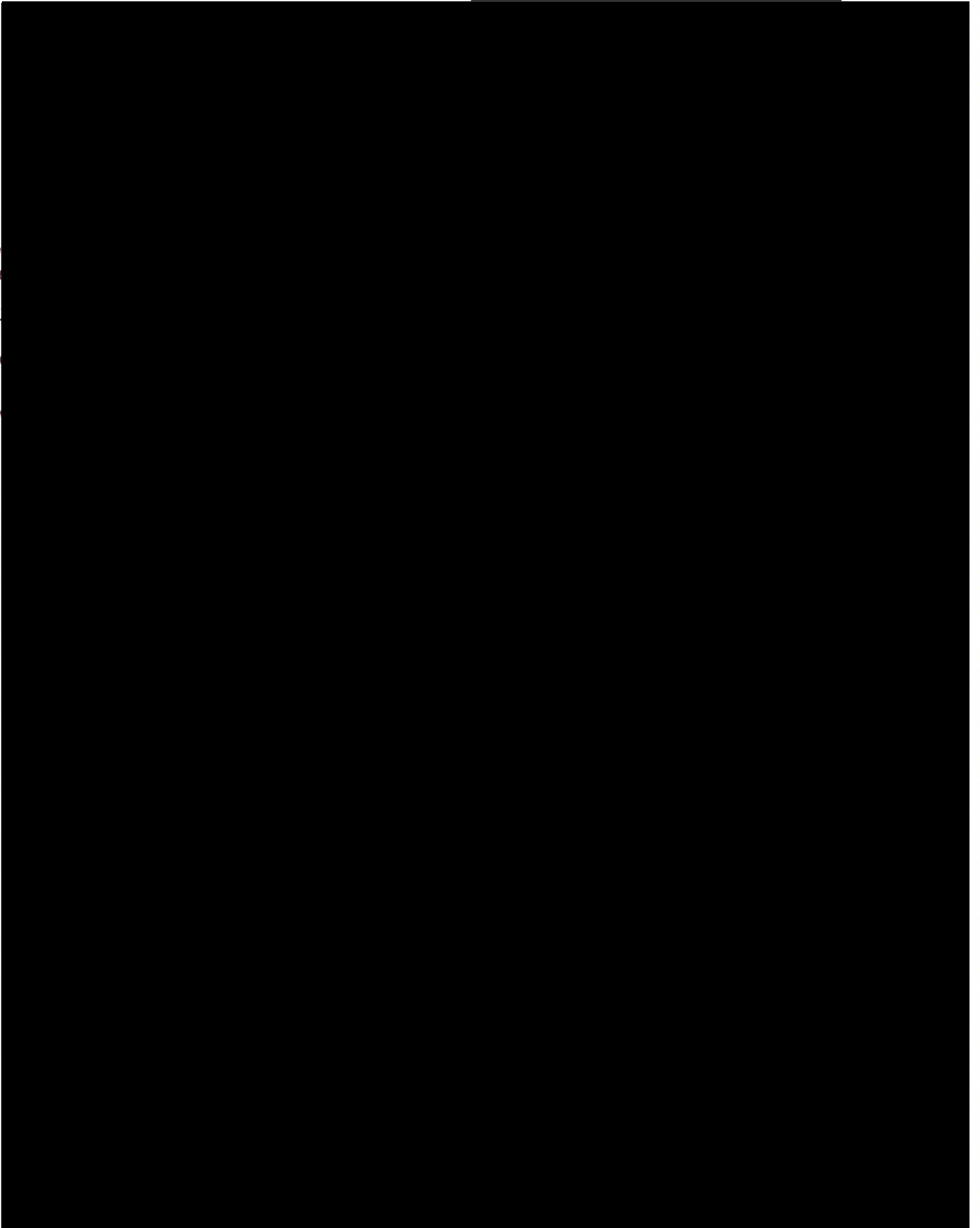
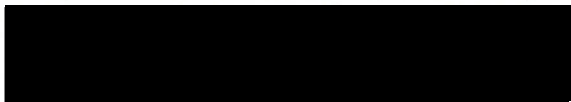
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f/5.6, 135mm, ISO 400, Flash On



IMG_6054, 6/6/08 3:05 AM, Canon EOS DIGITAL REBEL XT, 1/60,
f/5.6, 135mm, ISO 400, Flash On

IMG_6055, 6/6/08 3:10 AM, Canon EOS DIGITAL REBEL XT, 1/60,
f/5.6, 135mm, ISO 400, Flash On

Case #



Case
at
m

Case #

- Vascular Surgeon ,

Car accident date, MARCH 27, 2008

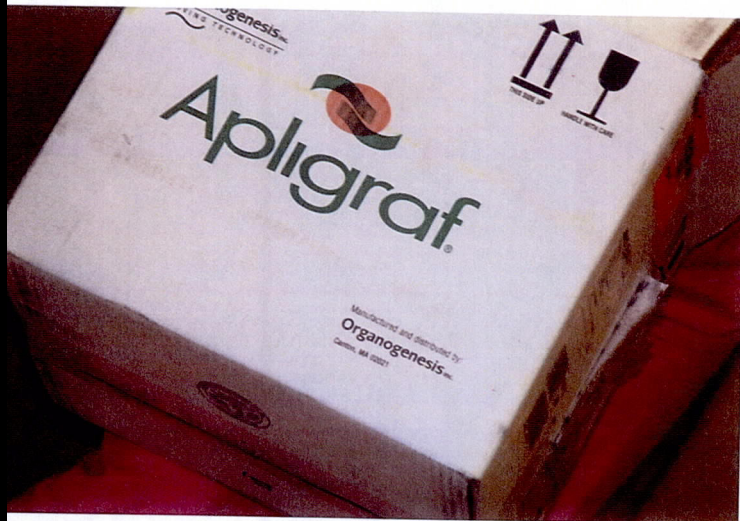
June 5, 2008

SKIN GRAFT

Left leg

Case #

Accident date, March 27, 2008



SKIN graft material
Used on Left leg
June 5, 2008

IMG_6056, 6/6/08 3:10 AM, Canon EOS DIGITAL REBEL XT, 1/60,
f/5.6, 135mm, ISO 400, Flash On

IMG_6058, 6/6/08 3:23 AM, Canon EOS DIGITAL REBEL XT, 1/80,
f/5.6, 135mm, ISO 400, Flash On

IMG_6059, 6/6/08 3:44 AM, Canon EOS DIGITAL REBEL XT, 1/60,
f/4.0, 28mm, ISO 400, Flash On

IMG_6060, 6/6/08 3:44 AM, Canon EOS DIGITAL REBEL XT, 1/60,
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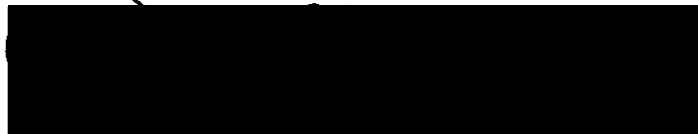
Repair Invoice
from

Giordano's Collision, Inc.

2160 Rte 112

Medford, NY 11747

phone



ESTIMATE SHEET AND REPAIR ORDER

Giordano's Collision

2164 Route 112
Medford, N.Y. 11763
Tel: (631) 654-0542
Fax: (631) 654-4786



NAME

ADDRESS

PHONE NO.

DATE

3-27-08 BUSINESS PHONE #

DATE WANTED

DATE RECEIVED AUTO

REPAIR ORDER NO.

NYS REPAIR SHOP NO. R 7069888

YEAR OF CAR	MAKE OF CAR	BODY TYPE	MILEAGE IN	OUT
2008	Lexus	ES350	4242	4246
VEHICLE I.D. NO.	STOCK NO.			
Prepared By: LDU Mfg. Date: Paint: Color: Gray Trim: Mldg:				

Repair	Replace	Labor	Parts & Materials	Sublet/Refinish
Repair, Paint & Install				
All Parts As Agreed.				
Sales Tax Included				
Total		19,995.04		
4/30 Pd. Ins. CK#				
		\$13,450.97		
5/2 Pd. CK#				
		\$1,000		
5/2 Pd. Ins. CK#				
		\$1,092.92		
5/2 Pd. Ins. CK#				
		\$4,071.15		

HAZARDOUS WASTE REMOVAL

TIME IN STORAGE	
OUTSIDE	DAYS
INSIDE	DAYS
Towing Charges pursuant to State, Local and Town Laws	
Storage Charges pursuant to State, Local and Town Laws	

GUIDES

TOTAL

PARTS — Prices Subject to Invoice & Materials

LABOR @	HR.	LABOR
BUMPERS		REFINISH
RADIATORS		SUBLET
USED PARTS		TOWING
GLASS		TOTAL
OTHER		TAX
MITCHELL/MOTORS		GRAND TOTAL

AUTHORIZATION TO REPAIR

I HEREBY AUTHORIZE YOU TO PERFORM THE ABOVE SPECIFIED REPAIR WORK ALONG WITH THE NECESSARY PARTS AND MATERIALS FOR THE AMOUNT SET FORTH BELOW. THE ITEMS AND THE TOTAL AMOUNT SET FORTH INCLUDE ONLY THOSE LABOR OPERATIONS, PARTS AND MATERIALS REQUIRED AS EVIDENCED BY OUR INSPECTION OF THE VEHICLE TO DATE. ADDITIONAL LABOR, PARTS AND MATERIALS MAY BE REQUIRED AFTER COMMENCEMENT OF THE WORK. YOU WILL BE INFORMED OF ANY ADDITIONAL COSTS PRIOR TO REPAIR. YOU AND YOUR EMPLOYEES MAY OPERATE THE VEHICLE ON STREETS, HIGHWAYS OR ELSEWHERE AT MY RISK FOR THE PURPOSE OF TESTING, INSPECTION AND DELIVERY. IT IS UNDERSTOOD AND AGREED THAT THIS COMPANY IS NOT RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE ABOVE VEHICLE AND/OR ITS CONTENTS RESULTING FROM FIRE, THEFT, ACTS OF GOD OR ANY CAUSE BEYOND OUR CONTROL WHILE BEING REPAIRED, STORED OR TESTED.

FROM _____ ON _____ AND AUTHORIZE DISPOSAL OF ALL REPLACED PARTS, WHICH I ACKNOWLEDGE I HAVE EXAMINED. I FURTHER ACKNOWLEDGE THAT I HAVE EXAMINED THIS VEHICLE AND FOUND THE REPAIRS SATISFACTORY

Dated _____ Signature: _____

(Authorized Signature) _____

Dates _____

ALL PARTS & PRICES SUBJECT TO CHANGE WITHOUT NOTICE

NOT RESPONSIBLE FOR ANY PERSONAL ITEMS LEFT IN CAR

BODY SHOP PAYMENT: CASH, CERTIFIED CHECK OR INSURANCE CO. CHECK ONLY.

TRAVELERS
NEW YORK APPRAISAL SERVICES
R#3010572

ALL SUPPLEMENTS MUST BE PRE-APPROVED BY TRAVELERS TO BE CONSIDERED.
CALL (888) 299-7456 PROMPT 2 FOR SUPPLEMENT REQUESTS.

CD LOG NO 2990 -2

SUPPLEMENT S2

03-31-08 10:45 AM

04-28-08 3:09 PM

CLAIM INFORMATION

CLAIM #	[REDACTED]	POLICY #	[REDACTED]	1
COMPANY	D/R 03/28/08	D/A 03/28/08	CLAIM REP	DANIEL NIGRA
FAX			WORK PH#	[REDACTED]
INSURED	[REDACTED]		LOSS DATE	03-27-08
CLAIMANT	[REDACTED]		LOSS TYPE	COLLISION
LOSS PAYEE			ACCT #	P03-S28-DN-R20

INSPECTION

TYPE	FIELD	
PRIMARY POI	FRONT END CENTER	SECOND POI UNDERCARRIAGE
APPRAISER NAME	MIKE FONTANA/C.G.	
LICENSE #	IA-930486	
WORK PHONE	(631) 577-7136	FAX (000) 000-0000
ADDRESS	100 BAYLIS RD BOX 9093	INSP DATE 03-31-08
CITY STATE	MELVILLE NY	LOCATION GIORDANO'S COLLISIO
ZIP	11747-9093	CITY STATE MEDFORD NY

OWNER

[REDACTED]
PATCHOGUE NY [REDACTED]

WORK# [REDACTED]
HOME# [REDACTED]

REPAIR

ATTN LOU	SHOP LIC# 7069888
GIORDANO'S AUTO BODY	CAR IN
2164 RT. 112	CAR OUT
MEDFORD NY 11763-	REPAIR 20 DAYS
SHOP PHONE (631) 654-0542	FAX

VEHICLE

2008 LEXUS ES350 STD 4 DR SEDAN
6CYL GASOLINE 3.5

OPTIONS

TWO-STAGE - EXTERIOR SURFACES	FRONT OBSTACLE WARNING SYSTEM
XENON HEADLAMPS	REAR OBSTACLE WARNING SYSTEM
ON-BOARD NAVIGATION SYSTEM	

BODY COLOR	GRAY	MILEAGE	4,242
CONDITION	GOOD	VIN	JTHBJ46G882 [REDACTED]
LICENSE #	AWM7005	CODE	LX24
LICENSE STATE	NY	VEH INSP #	

REMARKS:

*****SUPPLEMENT APPRAISED BY MICHAEL FONTANA*****

VEHICLE IS NOT A TOTAL LOSS!!!!!!

DATE ASSIGNED *4-28-08* DATE CONTACTED *4-28-08* DATE INSPECTED *4-28-08*
INSPECTED THE VEHICLE AT SHOP, DISCUSSED ADDITIONAL VEHICLE REPAIRS WITH SHOP
AT TIME OF VEHICLE INSPECTION. SUPPLEMENT IS FOR REAR SEATBELTS. REAR
SEATBELTS ALSO HAVE SHOULD HARNESS'S WITH TENSIONERS THAT DEPLOYED IN LOSS.
BOTH LT AND RT REAR TENSIONERS DEPLOYED SEE PHOTOS, A TURN SIGNAL SWITCH
BROKEN BY DRIVER AIRBAG, A TRANSMISSION MODULE BROKEN BY BEING HIT BY RAIL,
AND AN AIRBAG RESET. CALLED ORIGINAL APPRAISER CHARLIE TO DISCUSS CLAIM
UNABLE TO REACH HIM. VEHICLE REPAIRS WARRENT 20 DAYS. ECD DATE IS 4-30-08
A COPY OF APPRAISAL WAS LEFT WITH SHOP AT TIME OF INSPECTION.

OP CODES:

* = USER-ENTERED VALUE	E = REPLACE OEM	NG = REPLACE NAGS
EC = REPLACE AFTERMARKET	UC = REMAN/REBUILT OEM	UM = AFTERMARKET REMAN
EU = SALVAGE PART	EP = AFTERMARKET NEW	PC = RECON OEM PART
PM = AFTERMARKET RECON	TE = PARTL REPL PRICE	ET = PARTL REPL LABOR
IT = PARTIAL REPAIR	I = REPAIR	L = REFINISH
BR = BLEND REFINISH	TT = TWO-TONE	CG = CHIPGUARD
SB = SUBLET	N = ADDITIONAL LABOR	RI = R&I ASSEMBLY
P = CHECK	AA = APPEAR ALLOWANCE	RP = RELATED PRIOR
UP = UNRELATED PRIOR		

OP	GDE	MC	DESCRIPTION	MFR.PART NO.	PRICE	AJ%	B%	HOURS	R
E	0005		BUMPER, FRONT	5202133170	171.41			INC 1	
L	0005		BUMPER, FRONT	REFINISH				0.6 4	
				0.6 Surface					
E	0006		COVER, FRONT BUMPER	5211933945	294.08			1.8 1	
L	0006		COVER, FRONT BUMPER	REFINISH				3.8 4	
				2.7 Surface					
				0.6 Two-stage setup					
				0.5 Two-stage					
E	1046		RET, FRT BUMPER COVE LT	5311933141	11.22			INC 1	
E	1047		RET, FRT BUMPER COVE RT	5311933141	11.22			INC 1	
E	0069		RET, FRT BUMPER COVE LT	5214633050	23.91			INC 1	
E	1370		BRKT, FRT BUMPER SEN LT	8934833020	7.33			INC 1	
E	0535		FILLER, FRONT BUMPER LT	5314233040	9.54			INC 1	
E	0629		FILLER, FRONT BUMPER LT	5314833010	9.54		S1	INC 1	
E	0068		FILLER, FRONT BUMPER	5212833908	6.68			INC 1	
L	0068		FILLER, FRONT BUMPER	REFINISH				0.1 4	
				0.1 Surface					
E	0038		PANEL, FRT BMPR LICENS	5211433180	42.54			0.2 1	
E	0007		ABSORBER, FRONT BUMPER	5261133170	57.91			INC 1	
E	0127		SUPT, FRONT BUMPER M LT	5211633080	105.33			INC 1	
E	0028		GRILLE ASSEMBLY	5311133260	191.43			INC 1	
E	0025		CLIP, GRILLE	MULTI-PART	3.78			1	
E	0133		SEAL, FRONT END PANEL	5315533030	16.78			INC 1	
E	0012		MOULDING, GRILLE	5271133080	137.71			INC 1	
E	0111		EMBLEM, GRILLE	9097502079	13.42			0.2 1	

E	0041	#	HEADLAMP ASSY,XENON LT	8118533680	1,066.85	S1	INC	1
			# = 01, 46					
N	0973		HEADLAMPS AIM	ADDITIONAL LABOR				0.4 1
E	0039		LAMP ASSEMBLY, FOG LT	8122133200	137.76		INC	1
E	0083		PANEL, HOOD	5330133150	590.67			1.1 1
L	0083		PANEL, HOOD	REFINISH				4.6 4
			2.8 Surface					
			1.2 Edge					
			0.6 Two-stage					
E	0088		LATCH, HOOD PANEL	5351033340	62.93			0.1 1
E	0089		SUPT, HOOD LOCK VERT	5320833040	31.50		INC	1
E	0084		HINGE, HOOD PANEL LT	5342033210	30.88			0.2 1
L	0084		HINGE, HOOD PANEL LT	REFINISH				0.3 4
			0.3 Surface					
E	0085		HINGE, HOOD PANEL RT	5341033210	30.88			0.2 1
L	0085		HINGE, HOOD PANEL RT	REFINISH				0.3 4
			0.3 Surface					
E	0010		LABEL, HOOD	1779231220	1.00			0.1 1
E	0101		W/STRIP, HOOD PANEL	5338133090	23.75		INC	1
E	0073	07	PANEL ASSEMBLY, RAD SU	5320133200	401.64	S1	10.1	1
L	0073		PANEL ASSEMBLY, RAD SU	REFINISH				1.5 4
			1.5 Surface					
SB	0755		RADIATOR	SUBLET	75.00*			1
			>>112 RAD					
E	1018		SEAL, RAD MOUNTING PNL	5329533050	176.15		INC	1
E	0016		LABEL, RADIATOR SUPPOR	8872307030	0.58			0.1 1
E	0355		LABEL, RADIATOR SUPPOR	1679350010	1.06			0.1 1
E	0009		LABEL, RADIATOR SUPPOR	1129627020	1.46			0.1 1
E	0112	07	DEFLECTOR, RADIATOR LT	5329433040	50.95		INC	1
RI	0764		TANK, COOLANT RECOVERY	R&I ASSEMBLY				0.2 1
E	1186	01	BATTERY	LT 0054424F60575	87.55	S1	INC	1
			>>VISABLY DAMAGED					
N	0977		A/C EVACUATE & RECHAR	ADDITIONAL LABOR				1.4 2
E	0731		CONDENSER, A/C	8846006210	254.19		INC	2
I	0106	07	PNL ASSEMBLY, INR FN RT	REPAIR				0.5*1
L	0106	10	PNL ASSEMBLY, INR FN RT	REFINISH				0.5*4
			0.5* Surface					
			>>REFINISH REPAIRED AREA					
I	0118	07	PNL, INR FENDER FRON LT	REPAIR				1.5*1
L	0118		PNL, INR FENDER FRON LT	REFINISH				0.3 4
			0.3 Surface					
E	0183	07	EXTENSION, SIDE MEMB LT	5710806011	50.96	S1	0.3	1
L	0183		EXTENSION, SIDE MEMB LT	REFINISH		S1	0.2	4
			0.2 Surface					
E	0586		CRADLE, ENGINE	5110033070	1,338.38	S1	12.0	2
			>>VISABLY DAMAGED					
I	0103		FENDER, FRONT	LT REPAIR				4.0*1
L	0103		FENDER, FRONT	LT REFINISH				1.7 4
			1.4 Surface					
			0.3 Two-stage					
I	0104		FENDER, FRONT	RT REPAIR				1.5*1

L	0104 10	FENDER, FRONT	RT REFINISH		1.8*4
			1.5* Surface		
			0.3 Two-stage		
		>>REFINISH WITHIN PANEL FULL CLEAR			
E	1049	SEAL, FENDER-HOOD	LT 5380633010	33.79	1
RI	1050	SEAL, FENDER-HOOD	RT R&I ASSEMBLY		0.2*1
E	0773	AIRBAG SENSOR, FENDE	LT 8917339365	62.53	0.2 2
RI	0108	BLOCK, JUNCTION	LT R&I ASSEMBLY		0.4*2
		>>REMOVE FROM & SECURE FROM REPAIR AREA			
E	1243	MODULE, COMPUTER	LT 8953033042	599.02	S1 0.2 2
		>>ACTUAL PART NUMBER 8953033132			
E	0115 07	SIDE MEMBER ASSEMBL	LT 5702833901	455.19	S1 7.4 1
L	0115	SIDE MEMBER ASSEMBL	LT REFINISH		1.0 4
			1.0 Surface		
E	0700	COVER, ENGINE FRONT	LT 5144233090	85.75	INC 2
E	0090	COVER, ENGINE	LT 5379633010	226.34	INC 2
		>>VISABLE DAMAGED CRACKED @ MTG TAB			
E	0728	AIR CLEANER ASSEMBLY	1770031740	538.67	INC 2
		>>VISABLY DAMAGED			
E	0802	DUCT, AIR INTAKE	177520P010	51.64	INC 2
		>>VISABLY DAMAGED			
RI	0733	RESONATOR, AIR CLEANER	R&I ASSEMBLY		0.2 2
SB	0908	WHEEL, REAR	RT SUBLET	135.00*	INC*1
		>>WHEEL FIX IT			
N	0988	SUSP ALIGN, 4 WHEEL	ADDITIONAL LABOR		2.0 2
RI	0149	RESERVOIR, W/S WASHER	R&I ASSEMBLY		0.2 1
E	0865	CLOCK SPRING	843060E010	267.33	S1 0.2 2
E	0806	LEVER, W/SHIELD WPR/WS	8465247031	161.39*	S1 INC 2
		>>ACTUAL PART NUMBER 8465233440			
E	0945 01	PANEL, INSTRUMENT LOWE	5530233180A0	162.02	S1 INC 2
E	0853	MODULE, AIRBAG CONTROL	8917033530	242.18*	S1 0.8 2
		>>ACTUAL PART NUMBER 8917033550			
E	0875	LEVER, TURN SIGNAL	8414048140	161.39*	S2 INC 2
		>>TURN SIGNAL SWITCH ACTUAL PART # 84652-33440 SEE INVOICE			
E	0786 01	AIRBAG, STEERING WHEEL	4513033500C0	842.77	INC 2
E	0815 01	AIRBAG, KNEE BOLSTER	LT 7390033030A0	865.51	S1 0.3 2
E	0934	AIRBAG, INSTRUMENT PNL	7396033111	865.51*	S1 6.0 2
		>>ACTUAL PART NUMBER 7390033030C0			
E	0670 01	SEATBELT, FRONT	LT 7322033500A0	130.11	S1 0.8 1
E	0702 01	SEATBELT, REAR	LT 7337033110A0	208.19	S2 1.6 1
		>>TENSIONER DEPLOYED			
E	0703 01	SEATBELT, REAR	RT 7336033140A0	208.19	S2 0.2 1
		>>TENSIONER DEPLOYED			
I	0187 07	PANEL, ROCKER	LT REPAIR		0.4*1
		>>CLAMP DAMAGE			
L	0187 10	PANEL, ROCKER	LT REFINISH		1.0*4
			0.8* Surface		
			0.2 Two-stage		
		>>REFINISH REPAIRED AREA FULL CLEAR			
I	0188 07	PANEL, ROCKER	RT REPAIR		0.4*1
		>>CLAMP DAMAGE			

L	0188	10	PANEL,ROCKER	RT REFINISH			1.0*4
				0.8* Surface			
				0.2 Two-stage			
			>>REFINISH REPAIRED AREA FULL CLEAR				
RI	0274		DEFLECTOR,ROCKER PA LT	R&I ASSEMBLY			INC 1
RI	0275		DEFLECTOR,ROCKER PA RT	R&I ASSEMBLY			INC 1
I	0209		PNL,FRONT DOOR OUTE LT	REPAIR			1.0*1
			>>FRONT EDGE DAMAGE				
L	0209		PNL,FRONT DOOR OUTE LT	REFINISH			1.5*4
				1.5* Surface			
				INC Two-stage			
			>>REFINISH WITHIN PANEL FULL CLEAR				
RI	0258		MLDG,FRONT DOOR BEL LT	R&I ASSEMBLY			0.3 1
RI	0229		MIRROR,OUTER R/C LT	R&I ASSEMBLY			0.9 1
RI	0227		HANDLE,FRONT DOOR O LT	R&I ASSEMBLY			0.4 1
I	0043		PANEL,ROOF SIDE LT	REPAIR			0.3*1
			>>L/UPPER BODY @ WINDSHIELD POST LOWER				
L	0043	10	PANEL,ROOF SIDE	LT REFINISH			1.3*4
				1.0* Surface			
				0.3 Two-stage			
			>>REFINISH WITHIN PANEL FULL CLEAR				
BR	0389		PANEL,QUARTER	LT BLEND REFINISH			0.0*4
				0.0* Blend			
				INC Two-stage			
			>>CLEAR ONLY NO BREAK FOR UPPER BODY REFINISH				
RI	0397		DOOR,FUEL FILLER LT	R&I ASSEMBLY			0.3 1
RI	0559		TAILLAMP ASSEMBLY,O LT	R&I ASSEMBLY		S1	1.7 1
N	0566		REAR BUMPER COVER R&I	ADDITIONAL LABOR			0.5*1
			>>DROP L/S FOR QUARTER CLEAR				
N	M14		CORROSION PROTECTION	ADDITIONAL LABOR	6.00*		0.3*1
SB	M60		HAZARDOUS WASTE REMOVA	SUBLET	3.00*		1
N	M66		COLOR SAND AND BUFF	ADDITIONAL LABOR			1.0*1*
			>>MATCH POLISHED FINISH				
I	M67		RESET ELECTRICAL COMPO	REPAIR			0.5*1
EC			SEAM SEALER	REPLACE AFTERMARK	16.50*		0.4*1*
			>>URATHANE W/SHOP				
EC			COOLANT	REPLACE AFTERMARK	15.00*		1*
N			RESET SRS SYSTEM	ADDITIONAL LABOR		S2	2.0*2*
E			MICH. R/R TIRE	REPLACE OEM	179.00*		INC*1*
			>>HOUSE OF TIRES 516-7319554-RAY -215/55R17MXV4				
N			SET UP & MEASURE	ADDITIONAL LABOR			2.0*3
N			PULL UNIBODY/STRUCTURE	ADDITIONAL LABOR			5.0*3*
			>>CORRECT L/RAIL BACK/CORRECT L/UPPER BODY/CORRECT FRONT SWAY				
SB			MT./BAL TIRE	SUBLET	10.00*		1*
EC			FREON (R-134)	REPLACE AFTERMARK	25.00*		1*
E			TRANS MODULE	REPLACE OEM	599.02*	S2	1*
			>>PART # 89530-33132 SEE INVOICE, HOUSING CRACKED				

112 ITEMS

MC MESSAGE

01 CALL DEALER FOR EXACT PART # / PRICE
 07 STRUCTURAL PART AS IDENTIFIED BY I-CAR
 10 INCLUDES AUDATEX TIME TO CLEAR ENTIRE PANEL.
 46 PRINTABLE PXN COMPARE

FINAL CALCULATIONS & ENTRIES

PARTS

GROSS PARTS	\$ 12,398.51
OTHER PARTS	\$ 62.50
PAINT MATERIAL	\$ 602.00

ADJUSTMENTS

DISCOUNT

MARKUP

PARTS & MATERIAL TOTAL	\$ 13,063.01
TAX ON PARTS & MATERIAL @ 8.625%	\$ 1,126.68

LABOR	RATE	REPLACE HRS	REPAIR HRS	
1-SHEET METAL	\$ 52.00	29.2	12.3	\$ 2,158.00
2-MECH/ELEC	\$ 52.00	20.3	5.4	\$ 1,336.40
3-FRAME	\$ 52.00		7.0	\$ 364.00
4-REFINISH	\$ 52.00	21.5		\$ 1,118.00
5-PAINT	\$ 28.00			

LABOR TOTAL	\$ 4,976.40
TAX ON LABOR @ 8.625%	\$ 429.21
SUBLET REPAIRS	\$ 223.00
TAX ON SUBLET @ 8.625%	\$ 19.23
TOWING	\$ 145.00
TAX ON TOWING @ 8.625%	\$ 12.51
STORAGE	
TAX ON STORAGE @ 8.625%	

GROSS TOTAL	\$ 19,995.04
LESS: DEDUCTIBLE	UNKNOWN-

NET TOTAL	\$ 19,995.04
-----------	--------------

DEDUCTIBLE ADJUSTMENT	S1
ACTUAL SUPPLEMENT TOTAL	\$ 1,492.92
LESS: PREVIOUS NET TOTAL	\$ 18,502.12-

NET SUPPLEMENT TOTAL	\$ 1,492.92
----------------------	-------------

PXN C/00/00/00/00/00 CUM 01/00/00/01/01 Geocode: 11747 BRX/NYC/QNS/BRK/LI
 AUDATEX PENPRO W0412 S2 LOG2990 -2 04-28-08 15:22:20
 REL 4.12.15 DT 04/08 UP04/26/08
 (C) 1993 - 2006 AUDATEX NORTH AMERICA, INC.

** THIS IS AN AUDATEX "FAST START" ESTIMATE. PLEASE CALL YOUR LOCAL DEALER
 TO CONFIRM PART NUMBERS AND PRICES. **

Estimate Summary Page
MIKE FONTANA/C.G.

NET SUPPLEMENT TOTAL			\$ 1,492.92
DEDUCTIBLE ADJUSTMENT	\$ 0.00	S1	
ACTUAL SUPPLEMENT TOTAL	\$ 1,492.92		
LESS: PREVIOUS NET TOTAL			\$ 18,502.12-
GROSS TOTAL			\$ 19,995.04
LESS: DEDUCTIBLE			UNKNOWN-
NET TOTAL			\$ 19,995.04
DEDUCTIBLE ADJUSTMENT	\$ 0.00	S1	
ACTUAL SUPPLEMENT TOTAL	\$ 1,492.92		
LESS: PREVIOUS NET TOTAL			\$ 18,502.12-
NET SUPPLEMENT TOTAL			\$ 1,492.92

AUDATEX PENPRO W0412 S2 LOG2990 -2 04-28-08 15:22:20
REL 4.12.15 DT 04/08 UP04/26/08
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