

Xellence Motor Svc & Repair

60 Main Street
 Hackettstown, NJ 07840
 Tel: 908-813-8744 • Fax: 908-850-1898
 xellencemotor@verizon.net

Invoice I002895

Date: 4-2-2022
 Estimate: Q002351
 R/O: J002709

Customer **Matt McCann (MCK002)**

192 Dell Place
 Stanhope NJ 07874

Cell: 973-349-6310

msmccann@gmail.com
 Alternative Contact: Matt

Vehicle **2018 Audi SQ5 Premium Plus**

3.0 GAS
 WA1C4AFY8J2036989

Miles In: 62,622
 Miles Out: 62,622
 License Plate: T44FSN NJ

Work Performed**Camshaft, Lifters and Push Rods**

Labor	Tech	Hrs	Price	Total
Remove & Replace - Timing Chain - Camshaft & Timing - Timing Chain, R&R		22.00	120.00	2,640.00
Remove & Replace - Camshaft, Lifters and Push Rods - Camshaft & Timing - Camshaft, R&R - Right Bank - Both		7.90	120.00	948.00
Oil Change		1.00	165.00	165.00
Remove & Replace - Oil Pan - Oil Pan - Oil Pan Gasket, R&R - Lower		1.60	120.00	192.00
Coolant Service		1.00	150.00	150.00
Remove & Replace - Timing Components - Variable Valve Timing - Actuator, R&R - Right Bank - Both		4.80	120.00	576.00
Remove & Replace - Camshaft Position Sensor - Powertrain Control - Camshaft Position Sensor, R&R - Right Bank		0.60	120.00	72.00
Parts	Part No	Qty	Price	Total
21 - Outlet Camshaft Cylinders 1-3	06M109102EP	1.00	505.00	505.00
13 - Rocker Arms	0P2109417	12.00	16.80	201.60
18 - Right Timing Chain	06M109450P	1.00	231.67	231.67
Camshaft Position Sensor	06M907601D	1.00	63.33	63.33
Injector Seal	06M906036AA	3.00	15.00	45.00

Camshaft, Lifters and Push Rods SubTotal \$5,789.60

Labor

Labor	Tech	Hrs	Price	Total
Shop Labor-Alignment		1.00	220.00	220.00

Labor SubTotal \$220.00

Total

Labor 4,963.00
 Parts 1,046.60
 Hazmat* 0.00
 Supplies* 0.00
 Taxes 398.16

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Invoice Total \$6,407.76* Shop Supply & Hazmat Fees: This charge represents costs and profits (where applicable) to this repair facility for miscellaneous shop supplies, and/or waste removal

Date	Method	Reference	Amount
03-16-2022	Cash	Paid Mar 16 2022	3,000.00
04-02-2022	Cash	Paid 4 2 2022	3,407.76
Payment Totals			6,407.76
Balance Due			0.00

Authorization

Original Estimate Total:

Authorization Method: ☐ email ☐ text ☐ phone ☐ fax ☐ in person

Date: Contact Details:

Authorized By:

X*Customer Signature*

Save replacement parts for inspection or return? (Core may apply)

☐ Yes☐ No