



Labor and Storage Charges Survey

Repair facility name and address:

Does your repair facility utilize one of the major collision estimating guide software programs for estimating and/or billing repairs? (CCONE, Mitchell, Auditex, Webest) Yes No

If yes, please provide your retail labor rate/multiplier used in conjunction with the estimating guide labor units:

Body (steel vehicles):	\$ _____	Refinish (steel vehicles):	\$ _____
Structural (steel vehicles):	\$ _____	Carbon Fiber	\$ _____
Frame (steel vehicles):	\$ _____	Mechanical:	\$ _____
Frame (Alum. vehicles):	\$ _____	Specialty / Oversized vehicles:	\$ _____
Aluminum (non-structural):	\$ _____	Paint Materials	\$ _____
Aluminum Structural	\$ _____	Body/Repair Materials	\$ _____

Other: (please specify labor type and rate/multiplier utilized)

Please state your repair facility's target technician labor efficiency ratio(s) (expressed as a %) using the above multipliers/labor rates?

_____ %

Please state your shops retail hourly labor rate(s) for work performed by the actual time clock hour (not labor units from an estimating guidebook) and each labor category for which you charge for this type of labor:

Does your repair facility charge for the actual paint and body repair materials utilized for a repair itemized on your final bill or on a separate invoice instead of using a multiplier based on refinish or repair hours?

Yes No

Repair facility credentials:

Which OEM Certification(s) does your repair facility possess? Please check all that apply:

BMW/MINI		Ford		Fiat/Chrysler		Subaru	
Honda/Acura		Toyota		Volkswagen		Mazda	
Audi		Infiniti		Hyundai		Mercedes-Benz	
Porsche		KIA		Lexus		Land Rover/Jaguar	
GM		Nissan/GTR		Tesla		Rivian	
McLaren		Volvo		Cadillac		Corvette/C8	

Other: _____

Is your repair facility I-CAR gold class? Yes No

Does your repair facility have ASE certified technicians? Yes No

Do your technicians have welding training from I-CAR, an OEM program or other programs: Yes No
 Please state which program(s): _____

Please circle the employee benefits your company offers employees: Medical, Dental, Vision, PTO/vacation pay, Sick pay, holiday pay, 401k/matching retirement account, tool allowance, jury duty pay, other _____

Repair facility storage charges:

Please provide your daily rate for storage of vehicles:

Number of stalls & parking spots:

- Outdoor Storage: \$ _____
- Indoor Storage: \$ _____
- Storage in a Production Bay: \$ _____
- Storage in a Critical Stall (frame rack/lift): \$ _____
- Oversized vehicle Storage: \$ _____

Signature: _____

Name: _____

Job Title: _____

Date: __/__/__