

- Woburn 781-933-4000
- Westwood 781-329-9090
- Waltham 781-891-7350
- Natick 508-655-6700

- Beverly 978-927-4061
  - Lowell 978-458-6600
  - Hudson 978-568-0404
- www.hogantire.com

Invoice Date	Cust No.	Order No.	Page	Invoice No.
05/04/2016	7	7 - 895803	1 / 1	850590

Mileage: 38,447  
2000 TOYOTA ECHO

Time in 1:09 PM  
Time out 1:20 PM

*Visa \$45.00  
(ECHO)*

Sold To: [Redacted]

Ship To:

Purchase Ord. No.	Sales Person	Main Phone	Other Phone	Ship Via	Terms: RET
578		(978) 927-2015			VIN: JTDDBT1235Y0097074 Entered: 578

Item No.	Description	Qty Ordered	Qty Shipped	F.E.T.	Price	Net Extension
DIAG	DIAG/INSPECTION SERVICES...	1.00	1.00		0.00	0.00
DIAGNAO	DIAGNOSTIC CHK ENG LIGHT SCAN/RESET	1	1		45.00	45.00
	*P0440 SM EVAP LEAK, CLEARED					

Pay Method	Account	Amount	Signature
ISA	****2624	45.00	<i>JPMG</i>

We recommend you return for a torque check after the first 10-50 miles when wheels are removed. See hogantire.com for warranty details.  
Corporate Office: PO Box 2235, Woburn, Ma 01888 | 781-933-4004

Sub-Total Labor: 45.00  
Non-Taxable Amount: 45.00  
Taxable Amount: 0.00  
**Total: 45.00**

Customer Authorization for Total

*mom car  
(ECHO) pd' Visa*

**WINDHAM MOBIL BRAKE AND TIRE**

Invoice

54 HAVERHILL RD

Windham, NH 03087-0000

Shop Phone: (603) 818-8430

Fax: (603) 216-5193

Email: WINDMOBIL@COMCAST.NET

Web Address: WWW.WINDHAMMOBIL.COM

34963

Estimate Ref #36,520

Date Printed: 01/08/2015

Printed Time: 4:31 pm

Hat/Ref:

WINDHAM MOBIL SERVICE CENTER

Time Promised:

DATA/ECHO L4 1.5L 1497CC FI GAS N 1NZFE

'8

Mileage In: 36,541

Date Written: 01/07/2015

Mileage Out: 36,580

Written By:

DOM:

Save Old Parts: No

Job Name	Description	Technician	Qty	List	Extended
Job #1	REPLACE EXHAUST BOLT AND SPRING	BOB			
Part 4978	EXHAUST BOLT		2.00	8.94	17.88
Part 4979	EXHAUST SPRING		2.00	10.14	20.28
Part 9215	GASKET		1.00	12.38	12.38
Labor 1	Work Requested - REPLACE EXHAUST BOLT AND SPRING		1.50	84.50	126.75

Work Performed - EXTRACT ROTTED BOLTS FROM MANIFOLD..

Job #2	ENGINE MOUNT - Replace - Rear Mount	BOB			
Part 1237123011	ENGINE MOUNT - Rear Mount - Auto Trans		1.00	64.42	64.42
Labor 1	Work Requested - ENGINE MOUNT - Replace - Rear Mount		0.80	84.50	67.60

**"WE APPRECIATE ALL YOUR BUSINESS"**

Payment Date	Type	Method	Amount
1/8/2015	Check	#7252	341.91
Payment Totals:			<b>\$341.91</b>

Parts: \$114.96

Labor: \$194.35

Sublet: \$0.00

Misc: \$0.00

Hazmat: \$14.86

Supplies: \$17.74

Tax Total: \$0.00

Invoice Total: **\$341.91**

Less Paid: 341.91

Balance Due: \$0.00



9272015

665060

# Ira Toyota Scion

161 Andover St. \* Rt. 114  
Danvers, MA 01923  
978-739-8333 \* 800-230-0982  
www.iramotorgroup.com

\*INVOICE\*

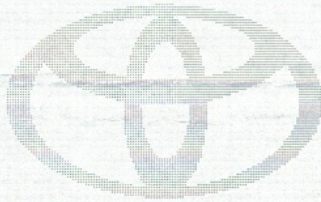
PAGE 1

SERVICE ADVISOR: 6441 ILANA SNYDERMAN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG
ABSOLUTELY	00	TOYOTA ECHO	JTDBT1235Y0097074		18512/18512	268..
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	DATE	PAYMENT
14NOV00	IS				85.00	CASH
			OPTIONS: STK:TY4242 ENG:1NZ-FF			
08:36	24NOV06	09:17	24NOV06			

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A							
STATE INSPECTION							
SI STATE INSPECTION							
925 RODRIGUEZ, TROY LIC#: /							
CT							29.00
*****							29.00

!!!!!!!!!!!!!!THANK YOU!!!!!!!!!!!!!!  
 FOR  
 CHOOSING IRA MOTOR GROUP  
 !!!!!!!!!!!!!!!



# TOYOTA



NOV 24 2006

VISA

ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT  
UNLESS SPECIFIED OTHERWISE

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR  
ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY  
OTHER CAUSE BEYOND OUR CONTROL.

In addition to the charges for parts, labor, tax, etc., Ira Toyota Scion also charges a "shop charge" as part of the repair bill. This "shop charge" is to help defray the costs of certain materials that cannot be accurately itemized, but which are generally used in the repair and service of vehicles. These items include, but are not limited to, rags, bolts, screws, hand cleaner, small amounts of lubricant, etc. This charge is calculated as a percentage of the total labor charge.

x \_\_\_\_\_

Replacement parts and tires are warranted for defects in material or workmanship by the manufacturer.

Please present your receipt and the vehicle to our Service Department during normal business hours.

DESCRIPTION	TOTALS
LABOR AMOUNT	29.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP CHARGE	0.00
TOTAL CHARGES	29.00
DISCOUNTS/DEDUCTIBLES	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	29.00

CUSTOMER COPY



9272015

spat  
Done  
11/17

618379

# Ira Toyota Scion

161 Andover St. \* Rt. 114  
Danvers, MA 01923  
978-739-8333 \* 800-230-0982  
www.iramotorgroup.com

\*INVOICE\*

PAGE 1

SERVICE ADVISOR: 6757 JIM HOGAN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG	
ABSOLUTELY	00	TOYOTA ECHO	JTDBT1235Y0097074		17703/17703	T272	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
14NOV00 IS			17APR06		85.00	CASH	17APR06

OPTIONS: STK:TY4242 ENG:1NZ-FF

08:35 17APR06 10:46 17APR06

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A INSPECT DRIVERS FLOOR PANEL FOR SURFACE RUST, DETERMINE IF FURTHER WORK IS REQUIRED. LOC/4620MF

CAUSE: RECALL

4620MA INSPECT FLOOR PAN AND APPLY SEALER KIT

6756 RAPENELLI, SERGIO LIC#: /

WT45

1 04004-67152 FLOOR SILENCER KIT

5 C0505-MS930-DS THEROSTAT SEALER MS-9

FC: RECALL PART#: COUNT:

CLAIM TYPE:

AUTH CODE:

(N/C)  
(N/C)  
(N/C)

C/R RECALL TECH VERIFIED RECALL TECH PERFORMED RECALL

\*\*\*\*\*

B COURTESY INSPECTION

CI COURTESY INSPECTION

6756 RAPENELLI, SERGIO LIC#: /

ISP

\*\*\*\*\*

(N/C)

!!!!!!!!!!!!!! THANK YOU!!!!!!!!!!!!!!  
FOR  
CHOOSING IRA MOTOR GROUP  
!!!!!!!!!!!!!!

ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

In addition to the charges for parts, labor, tax, etc., Ira Toyota Scion also charges a "shop charge" as part of the repair bill. This "shop charge" is to help defray the costs of certain materials that cannot be accurately itemized, but which are generally used in the repair and service of vehicles. These items include, but are not limited to, rags, bolts, screws, hand cleaner, small amounts of lubricant, etc. This charge is calculated as a percentage of the total labor charge.

x \_\_\_\_\_

Replacement parts and tires are warranted for defects in material or workmanship by the manufacturer.

Please present your receipt and the vehicle to our Service Department during normal business hours.

DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP CHARGE	0.00
TOTAL CHARGES	0.00
DISCOUNTS/DEDUCTIBLES	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

CUSTOMER COPY



CUSTOMER #: 9272015

1010274

# Ira Toyota Scion

161 Andover St. \* Rt. 114  
Danvers, MA 01923  
978-739-8333 \* 800-230-0982  
www.iramotorgroup.com

\*INVOICE\*

PAGE 1

BUS:		CELL:		SERVICE ADVISOR: 9530 SCOTT HERWIG			
COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG	
ABSOLUTELY	00	TOYOTA ECHO	JTDBT1235Y0097074		31112/31112	T704	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
14NOV00 IS							
14NOV00 DD			WAIT 18AUG11		VARIES	CASH	18AUG11
			OPTIONS: STK:TY4242 ENG:1NZ-FF				

09:53 18AUG11	12:28 18AUG11						
LINE OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL	

A CUST STATES THERE IS A LOUD ENGINE/EXHAUST TYPE NOISE, PLEASE CK AND ADVISE

FDIAG 1.0 FREE DIAGNOSIS  
5287 BEAULIEU,CHUCK LIC#: /  
IDIAG

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE A:	(N/C) 0.00
--------	------	--------	------	--------	------	---------------	---------------

31112 FOUND CENTER PIPE AND THE MUFFLER ARE ROTTED THROUGH. THE EXH MANIFOLD FLANGE IS ROTTED BADLY.

B PERFORM 26-POINT INSPECTION OF VEHICLE. ADVISOR WILL ATTACH TOP COPY OF FORM TO YOUR INVOICE.

CI PERFORM 26-POINT INSPECTION OF VEHICLE.  
ADVISOR WILL ATTACH TOP COPY OF FORM TO YOUR INVOICE.

5287 BEAULIEU,CHUCK LIC#: /  
CT

BR3 REARS ARE 3MM, FRONTS ARE 4MM  
5287 BEAULIEU,CHUCK LIC#: /  
CT

TR5 \*\*\*TIRES ARE 5/32\*\*\*  
5287 BEAULIEU,CHUCK LIC#: /  
CT

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE B:	0.00
--------	------	--------	------	--------	------	---------------	------



\* THANK YOU FOR CHOOSING IRA TOYOTA DANVERS \*  
TO SERVICE YOUR VEHICLE  
IF YOU ARE NOT 100% SATISFIED  
\*\*\* PLEASE CONTACT \*\*\*

CHARLIE ALICARDI, SERVICE DIRECTOR  
978-739-8391 calicardi@iramotorgroup.com  
OR LORRAINE OBRIEN 978-739-3770

<p>ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE</p> <p>NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.</p> <p>In addition to the charges for parts, labor, tax, etc., Ira Toyota Scion also charges a "shop charge" as part of the repair bill. This "shop charge" is to help defray the costs of certain materials that cannot be accurately itemized, but which are generally used in the repair and service of vehicles. These items include, but are not limited to, rags, bolts, screws, hand cleaner, small amounts of lubricant, etc. This charge is calculated as a percentage of the total labor charge.</p> <p>x _____</p>	<p>Replacement parts and tires are warranted for defects in material or workmanship by the manufacturer.</p> <p>Please present your receipt and the vehicle to our Service Department during normal business hours.</p>	DESCRIPTION	TOTALS
		LABOR AMOUNT	0.00
		PARTS AMOUNT	0.00
		GAS, OIL, LUBE	0.00
		SUBLET AMOUNT	0.00
		SHOP CHARGE	0.00
		TOTAL CHARGES	0.00
		DISCOUNTS/DEDUCTIBLES	0.00
		SALES TAX	0.00
		PLEASE PAY THIS AMOUNT	0.00



# Quality Vehicle Inspection



Year/Model: 00 Echo Date: 8-8-11  
3590097074 Repair Order #: 1010274

Assistant Service Manager: Scott

Technician: \_\_\_\_\_

CHECKED AND OKAY			MAY NEED FUTURE ATTENTION			REQUIRES IMMEDIATE ATTENTION		
INTERIOR/EXTERIOR								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Head Lights / Tail Lights / Turn Signals / Brake Lights / Hazard Warning Lights / Exterior Lamps								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Washer Spray / Wiper Operation / Wiper Blades / Wiper Arms / Including Rear (if applicable)								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Condition (Inspect for Cracks, Chips, or Pitting)								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Upholstery / Carpet / Floor Mats / Mirrors / Glass								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Brake Adjustment								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Horn Operation								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel Tank Cap Gasket								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Conditioning Filter (if equipped)								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clutch Operation (if equipped)								
UNDER VEHICLE								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shock Absorbers / Suspension								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering Gear Box / Linkage and Boots / Ball Joints / Dust Covers								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muffler / Exhaust Pipes / Mountings								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Oil and/or Fluid Leaks								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brake Lines / Hoses / Parking Brake Cable								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive Shaft Boots / Constant Velocity Boots / U-joints / Transmission Linkage (if equipped)								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transmission / Differential / Transfer Case (Check Fluid Level, Fluid Condition and Fluid Leaks)								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel Lines and Connections / Fuel Tank Band / Fuel Tank Vapor Vent System Hoses								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspect Nuts and Bolts on Body Chassis								
UNDER HOOD								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fluid Levels: Oil / Coolant / Battery / Power Steering / Brake Fluid / Washer / Automatic Transmission								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Air Filter								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive Belts (condition and adjustment)								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Coolant Protection _____								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling System Hoses / Heater Hoses / Air Conditioning Hoses and Connections								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiator Core / Air Conditioning Condenser (if equipped)								

CHECKED AND OKAY			MAY NEED FUTURE ATTENTION			REQUIRES IMMEDIATE ATTENTION		
BATTERY PERFORMANCE								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Terminals / Cables / Mountings								
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check Condition of Battery (Storage Capacity Test) <i>Age</i>								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pass			Recharge Retest			Fail		

BRAKE AND TIRE			
Left Front		Right Front	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brake Lining <u>4</u> mm		Brake Lining <u>5</u> mm	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tire Tread <u>6</u> 32nds		Tire Tread <u>5</u> 32nds	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wear Pattern		Wear Pattern	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tire Pressure <u>32</u> psi		Tire Pressure <u>32</u> psi	
<i>cracks</i>			
Inspect Brake Lining		Inspect Tire Wear	
Left Rear		Right Rear	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brake Lining <u>3</u> mm		Brake Lining <u>3</u> mm	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tire Tread <u>6</u> 32nds		Tire Tread <u>7</u> 32nds	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wear Pattern		Wear Pattern	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tire Pressure <u>32</u> psi		Tire Pressure <u>32</u> psi	
<i>cracks</i>			
<input type="checkbox"/> Brake Inspection Not Performed This Visit			

**COMMENTS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Thank You*  
*Chen*





TOWN FAIR TIRE CENTERS OF MASSACHUSETTS LLC  
 129-139 ENDICOTT ST., DANVERS, MA 01923 TEL (978) 777-8350

**INVOICE**

INVOICE NO.  
40445-566

ACCOUNT NO. \_\_\_\_\_ P.O. # \_\_\_\_\_ PHONE: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

MR. \_\_\_\_\_  
 \_\_\_\_\_  
 CURRENT MILEAGE 28451 YEAR, MAKE, MODEL 00 TOYOTA Echo  
 \_\_\_\_\_  
 \_\_\_\_\_ 1915 \_\_\_\_\_ RED

01 \_\_\_\_\_ 366M \_\_\_\_\_ G.P. # \_\_\_\_\_ DATE 02/11/2010 TIME 11:27

QTY	SIZE	DESCRIPTION	IBM #	LIST	PRICE	AMOUNT
1	FIX FLAT	NEW VALVE & BALANCE	00153	14.95	3.95	3.95
1		FLAT REPAIR	00194	14.95	0.00	0.00

Free Flat Repair - The tire is removed from the wheel and thoroughly inspected. If the tire has a puncture wound, it will be repaired from the inside using a combination patch-plug. If the tire is leaking from the bead area, the tire and the rim are thoroughly cleansed and sealed with a bead sealant.

Due to the internal flat repair it is recommended to install a new valve stem and balance the tire before it is put back on the vehicle. The normal charge for these items is \$14.95 to \$19.95 depending on the rim diameter. The discounted price for the new valve stem and balancing the tire that has been repaired is only \$3.95.

Explanation: RR TIRE SLOW LEAK

PSI--FR:32 RR:32

SUB-TOTAL 3.95  
 MA SALES TAX 0.25  
 NON-TAXABLE 0.00  
**TOTAL 4.20**

Payaway Deposit 0.00  
 Balance Due 4.20

<b>SAFETY WARNING</b> After installation of mag wheels, all nuts or bolts must be retorqued (tightened) after the first 25 miles. CUSTOMER INITIALS _____	<b>COMMENTS - COMPLIMENTS - COMPLAINTS</b> Town Fair serves thousands of customers each year. In order to help us serve you better, if you have a comment, compliment, or complaint or just want to talk to us about our operation - please call - it will be greatly appreciated.	<b>Contact or Write</b> NEIL MELLEN, PRESIDENT TOWN FAIR TIRE 460 COE AVENUE EAST HAVEN, CT 06512 TELEPHONE (203)467-8600 OR TOLL FREE 1 (800) 972-2245 OR 1 (888) TOWNFAIR OR VISIT OUR WEBSITE @ www.townfair.com
	<b>STORE COPY</b>	





TOWN FAIR TIRE CENTERS OF MASSACHUSETTS LLC  
 129-139 ENDICOTT ST., DANVERS, MA 01923 TEL (978) 777-8350

## INVOICE - Layaway Payment

INVOICE NO.  
40445-566

ACCOUNT NO.

P.O. #

PHONE # [REDACTED]  
PHONE # [REDACTED]

N  
M  
A  
C  
[REDACTED]

CURRENT MILEAGE 0 YEAR, MAKE, MODEL

915

SALE TYPE

CLERK #

G.P. #

DATE

TIME

09 Layaway Payment

366

02/11/2010

11:38

QTY	SIZE	DESCRIPTION	IBM #	LIST	PRICE	AMOUNT
-----	------	-------------	-------	------	-------	--------

SIGNATURE	SUB-TOTAL	0.00
	MA SALES TAX	0.00
	NON-TAXABLE	0.00
	<b>TOTAL</b>	<b>0.00</b>

Layaway Balance 4.20  
 Wash 5.00  
 Change -0.80  
 New Balance 0.00

### SAFETY WARNING

After installation of mag wheels, all nuts or bolts must be retorqued (tightened) after the first 25 miles.  
 CUSTOMER INITIALS \_\_\_\_\_

### COMMENTS - COMPLIMENTS - COMPLAINTS

Town Fair serves thousands of customers each year. In order to help us serve you better, if you have a comment, compliment, or complaint or just want to talk to us about our operation - please call - it will be greatly appreciated.

Contact or Write  
 NEIL MELLEN, PRESIDENT TOWN FAIR TIRE  
 460 COE AVENUE EAST HAVEN, CT 06512  
 TELEPHONE (203)467-8600  
 OR TOLL FREE 1 (800) 972-2245 OR 1 (888) TOWNFAIR  
 OR VISIT OUR WEBSITE @ www.townfair.com

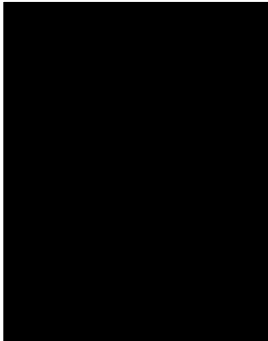


# Five Star Auto Repair

191 Essex St  
 Beverly, Massachusetts 01915  
 P (978) 922-9700 F (978) 927-4544

Red TOYOTA  
 Echo

Estimate Creation Date: 02/27/2018 08:53



2000 Toyota Echo 1.5L, L4, USA/Canada  
 376LP8  
 Miles

Part	Description	Part#/OpCode/Tax Option	Qty/Hrs	Price	Total
Part	Suspension Strut Assembly coil spring bushing & mount left front	4851059396	1.00	\$296.66	\$296.66
Part	Suspension Strut Assembly coil spring bushing & mount right front	485105962	1.00	\$296.66	\$296.66
Labor	removed and replaced front strut assembly		1.00	\$245.00	\$245.00
<b>Battery R&amp;R</b>					<b>\$838.32</b>

Type	Description	Part#/OpCode/Tax Option	Qty/Hrs	Price	Total
Part	Battery installed	00544270635	1.00	\$119.95	\$119.95
Part	oil change & filter		1.00	\$29.95	\$29.95
Fee	state inspection	Non Taxed	1.00	\$35.00	\$35.00
					<b>\$184.90</b>

<b>Parts Total:</b>	\$743.22
<b>Labor Total:</b>	\$245.00
<b>Shop Supplies:</b>	\$3.80
<b>Hazardous Materials:</b>	\$1.20
<b>Fees:</b>	\$35.00
<b>Subtotal:</b>	\$1028.22
<b>Sales Tax:</b>	\$46.45
<b>Total:</b>	<b>\$1074.67</b>

12 month warranty on parts and labor if defective only

signature :

date: / /

pd. in full  
 2/28/18  
 C.K.# 7929





**Meineke Car Care Center #398**  
**119 Rantoul Street**  
**Beverly, MA 01915**  
**(978)921-1577**

**Invoice Number: 18582**  
 Invoice Date: 10-17-11  
 Estimate ID: 036405  
 Invoice Code: 764109N763448S45

"Each Shop Individually Owned and Operated"  
 www.meineke.com

*repairs for Echo*



Vinicie                      Odometer                      Tag                      Vin                      Tech                      Writer                      Ad Lead  
 2000 TOYOTA ECHO                      31,395                      MA 376LP8                      EQ1                      \*\*\*                      REPEAT

Quantity	Item	Description	Warranty	MAP	A/D	Unit Price	Total
<b>ALIGN&amp;TIRE</b>							
2.00	2700-74185	SWAY BAR LINK/KIT		A	A	21.00	42.00
1.00	LABOR	SHOP LABOR TO INSTALL SWAY BAR LINKS		A	A	90.00	90.00
<b>Job Total:</b>							<b>132.00</b>
<b>VIS&amp;SAFETY</b>							
1.00	ST1	MASS STATE INSPECTION		A	A	29.00	29.00
<b>Job Total:</b>							<b>29.00</b>

*installed front on car*

Chris, Paul and the staff at Meineke Beverly want to thank you for your patronage. Your satisfaction is very important to us.

Sales Tax 1: 2.78

**PAYMENT RECEIPT**

**Map Code Legend**

- =Sugg-Failure Likely
- =Sugg-Customer Req.
- =Sugg-Maintenance
- =Sugg-Recommendation
- =Req-Performance
- =Req-Design Spec
- =Req-Missing

**A/D Legend**  
 A=Accepted  
 D=Declined

Shop Supplies:	2.52
Total Parts:	71.00
Total Labor:	90.00
Sub Total:	163.52
Sales Tax:	2.78
<b>Total Due:</b>	<b>\$166.30</b>

Printed: 10/17/2011 at 10:00:29AM

112840

ED BY X



# WINDHAM MOBIL SERVICE STATION

18 MAMMOTH RD.

Windham, NH 03087-0000

Shop Phone: (603) 594-2410

Fax: 594-2430

Email: WINDMOBIL@COMCAST.NET

Web Address: WWW.WINDHAMMOBIL.COM

Invoice

38156

Estimate Ref #39,678

Date Printed: 10/04/2016

Printed Time: 12:09 pm

Hat/Ref:

WINDHAM MOBIL SERVICE CENTER

Time Promised:



ECHO L4 1.5L 1497CC FI GAS N 1NZFE  
35Y0097074

Mileage In: 39,058

Date Written: 09/30/2016

Mileage Out: 39,058

Written By:

DOM:

Save Old Parts: No

Job Name	Description	Technician	Qty	List	Extended
EVAP.TEST	<b>SMOKE FUEL TANK AND HOSES</b>	carl			
Labor 1	Work Requested - CHECK EVAP.SYSTEM TO LOCATE LEAK		1.50	95.00	142.50
Work Performed - SMOKE SERVICE PORT AND ACTIVATE SOLENOID.					
REPLACE CANISTER PURGE ASSEMBLY AND FILLER TUBE					
Part 77201-52060	PIPE		1.00	155.27	155.27
Part 77300-20010	CAP		1.00	29.56	29.56
Part 77740-52030	CANISTER ASSEMBLY		1.00	380.42	380.42

Job #1

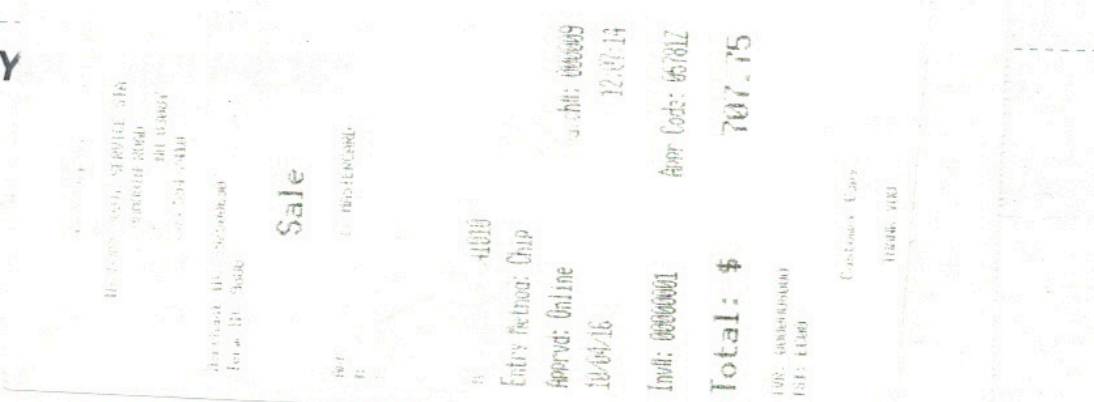
Note/Title

NEEDS  
FILLER TUBE ASSEMBLY

CHARCOAL CANISTER W/ VSV SOLENOID

carl

**"WE APPRECIATE ALL Y**



Payment Date	Type	Method	Amount
10/4/2016	Credit	MasterCard	707.75
<b>Payment Totals:</b>			<b>\$707.75</b>

Parts:	\$565.25
Labor:	\$142.50
Sublet:	\$0.00
Misc:	\$0.00
Hazmat:	\$0.00
Supplies:	\$0.00
Tax Total:	\$0.00
<b>Invoice Total:</b>	<b>\$707.75</b>
Less Paid:	707.75
<b>Balance Due:</b>	<b>\$0.00</b>

YOUR MAINTENANCE SPECIALIST





**Meineke Car Care Center #398**

**119 Rantoul Street  
Beverly, MA 01915  
(978)921-1577**

**Invoice Number: 17894**

Invoice Date: 08-19-11

Estimate ID: 034845

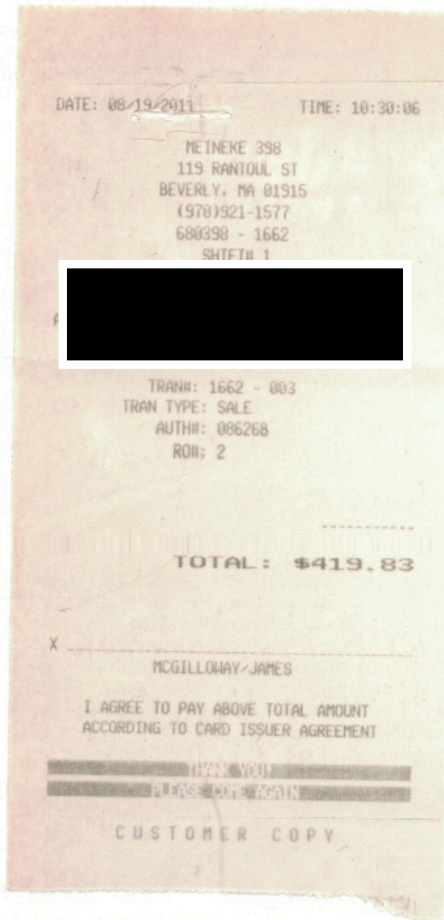
Invoice Code: 763874U763750H4

"Each Shop Individually Owned and Operated"  
www.meineke.com



Vehicle: 2000 TOYOTA ECHO      Odometer: 31,125      Vin: [Redacted]      Tech: EQ1      Writer: \*\*\*      Ad Lead: REPEAT

Quantity	Item	Description	Warranty	MAP	A/D	Unit Price	Total
<b>EXHAUST</b>							
1.00	IC5738	MUFFLER		A	A	266.56	266.56
1.00	MUFFLER LABO	MUFFLER LABOR		A	A	82.50	82.50
2.00	MISCPART	J HOOK	1 Year	A	A	8.99	17.98
1.00	1 P	PIPE		A	A	18.00	18.00
<b>Job Total:</b>							<b>385.04</b>



Chris, Paul and the staff at Meineke Beverly want to thank you for your patronage. Your satisfaction is very important to us.

Sales Tax 1: 19.84

**PAYMENT RECEIPT**

Map Code Legend	A/D Legend
1=Sugg-Failure Likely	A=Accepted
2=Sugg-Customer Req.	D=Declined
3=Sugg-Maintenance	
1=Sugg-Recommendation	
1=Req-Performance	
3=Req-Design Spec	
2=Req-Missing	

Visa	419.83
------	--------

Shop Supplies:	14.95
Total Parts:	302.54
Total Labor:	82.50
Sub Total:	399.99
Sales Tax:	19.84
<b>Total Due:</b>	<b>\$419.83</b>

Printed: 8/19/2011 at 10:29:45AM

112148



LATE TYPE <b>PAN</b>	REGISTRATION NUMBER [REDACTED]	REGISTRATION TYPE <b>PASSENGER</b>	EFFECTIVE DATE <b>09/01/15</b>	EXPIRES LAST DAY OF →	MONTH <b>08</b>	YEAR <b>17</b>	TRANSACTION NUMBER <b>92522200016022</b>
IFRS MODEL YEAR <b>2000</b>	MAKE <b>TOYT</b>	MODEL <b>ECHO</b>	BODY STYLE/TYPE <b>SEDAN</b>	COLOR <b>RED</b>	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIIE-MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.
VEHICLE IDENTIFICATION NUMBER <b>JTDBT1235Y0097074</b>		INSURANCE COMPANY <b>LIBERTY MUTUAL INS</b>	TITLE NUMBER <b>AV332837</b>		REGISTRAR <i>Cher C. Dwyer</i>		TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.
ESIDENTIAL ADDRESS (IF DIFFERENT)				NAME(S) OF OWNER(S) AND MAILING ADDRESS			
[REDACTED]				005533		<b>FEES</b> REGISTRATION 60.00 TITLE 0.00 SPECIAL PLATES 0.00 SALES TAX 0.00 <b>TOTAL 60.00</b>	
<b>MASSACHUSETTS DEPARTMENT OF TRANSPORTATION</b> <b>REGISTRY OF MOTOR VEHICLES DIVISION</b> The records of the RMV database constitute the official status of the vehicle registration.							

SPECIAL MESSAGE IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.	CHANGE OF ADDRESS
	STREET ADDRESS
	CITY, STATE, ZIP CODE

**Important Information for Vehicle Owners**

- Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place.
- By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: [www.massrmv.com](http://www.massrmv.com) or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above.

- Return the registration plates to the RMV immediately if:
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the **Bill of Sale, Title**, and completed **Reassignment of Title** for your records to document the transfer.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.



**Transferring Your Plates:** Massachusetts law (M.G.L. Chapter 90, Section 2) allows you to transfer **valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer** while you obtain insurance and a new registration. **All** the following must be met: 1. You are at least 18 years of age and you own the motor vehicle or trailer identified on this *Registration Certificate*. 2. You transfer ownership of this vehicle to another person or permanently lose possession of it (such as through repossession, etc.); 3. The newly acquired vehicle is of the **same vehicle type** (passenger vehicle to passenger vehicle, trailer to trailer etc.); the **same registration type** (passenger to passenger, commercial to commercial); and has the **same number of wheels**; and, 4. The **seller and buyer** properly complete the Assignment of the Certificate of Title (for the newly acquired "used" vehicle) or Certificate of Origin (if a "new" vehicle). If **all** the above are met, you may operate the newly acquired vehicle with the transferred plates **up to 5:00 pm of the 7th calendar day** following the date of transfer (or loss of possession). The day of transfer or loss is day #1. During that 7 days, you **must** carry the *Bill of Sale* (or the dealer's *Purchase Contract*) for the newly acquired vehicle **and this Registration Certificate** when operating the vehicle. See **FAQs About the Seven-Day Registration Transfer Law** on the RMV's website at [www.massrmv.com](http://www.massrmv.com).

**No Insurance Card Required:** Massachusetts's law does **not** require an Insurance card. The law, M.G.L. Chapter 90, Section 34A and Chapter 175, Section 113A requires the vehicle's owner to maintain a compulsory motor vehicle insurance policy or bond for bodily injury coverage and property damage insurance. If an insurer is identified on the face of this *Registration Certificate*, it is required by law to electronically notify the RMV (Registry of Motor Vehicles) if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.

**BE FIRST IN LINE BY GOING ONLINE AT WWW.MASSRMV.COM**

- |                                 |                                  |
|---------------------------------|----------------------------------|
| Schedule a Road Test            | Request a Duplicate Title        |
| Renew Your Driver's License     | Request a Duplicate Registration |
| Renew Your Registration         | Change Your Address              |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration     |
| Replace Your Driver's License   | Order a Special Plate            |

**NEED TO VISIT AN RMV OFFICE?**

**SAVE TIME**  
**Complete Your**  
**Application Online!**

**VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS**



- Woburn 781-933-4000
- Westwood 781-329-9090
- Waltham 781-891-7350
- Natick 508-655-6700

- Beverly 978-927-4065
  - Lowell 978-458-6600
  - Hudson 978-568-0404
- www.hogantire.com

Invoice Date	Cust No.	Order No.	Page	Invoice No.
05/04/2016	7	7 - 895803	1 / 1	850590
License: 376LP8 Mileage: 38,447				Time in 1:09 PM
2000 TOYOTA ECHO				Time out 1:20 PM

*Visa \$45.00  
(ECHO)*



Ship To:

Purchase Ord. No.	Sales Person	Main Phone	Other Phone	Ship Via	Terms: RET
578					VIN: JTDDBT1235Y0097074 Entered: 578

Item No.	Description	Qty Ordered	Qty Shipped	F.E.T.	Price	Net Extension
IAG CANAO	DIAG/INSPECTION SERVICES... DIAGNOSTIC CHK ENG LIGHT SCAN/RESET *P0440 SM EVAP LEAK, CLEARED	1.00 1	1.00 1		0.00 45.00	0.00 45.00

Payment Method	Account	Amount	Signature
SA	****2624	45.00	<i>JPMG</i>

we recommend you return for a torque check after the first 10-50 miles when wheels are removed. See hogantire.com for warranty details.  
Corporate Office: PO Box 2235, Woburn, Ma 01888 | 781-933-4004

Sub-Total Labor: 45.00  
Non-Taxable Amount: 45.00  
Taxable Amount: 0.00  
**Total: 45.00**

Customer Authorization for Total

*mom's car  
(ECHO) pd' Visa*



**WINDHAM MOBIL BRAKE AND TIRE**

54 HAVERHILL RD

Windham, NH 03087-0000

Shop Phone: (603) 818-8430

Fax: (603) 216-5193

Email: WINDMOBIL@COMCAST.NET

Web Address: WWW.WINDHAMMOBIL.COM

Invoice

34963

Estimate Ref #36,520

Date Printed: 01/08/2015

Printed Time: 4:31 pm

Hat/Ref:

WINDHAM MOBIL SERVICE CENTER

Time Promised:

2000 TOYOTA ECHO L4 1.5L 1497CC FI GAS N 1NZFE

VIN  
Lic  
Unit

Mileage In: 36,541

Date Written: 01/07/2015

Mileage Out: 36,580

Written By:

DOM:

Save Old Parts: No

Job Name	Description	Technician	Qty	List	Extended
Job #1	REPLACE EXHAUST BOLT AND SPRING	BOB			
Part 4978	EXHAUST BOLT		2.00	8.94	17.88
Part 4979	EXHAUST SPRING		2.00	10.14	20.28
Part 9215	GASKET		1.00	12.38	12.38
Labor 1	Work Requested - REPLACE EXHAUST BOLT AND SPRING		1.50	84.50	126.75
Work Performed - EXTRACT ROTTED BOLTS FROM MANIFOLD..					

Job #2	ENGINE MOUNT - Replace - Rear Mount	BOB			
Part 1237123011	ENGINE MOUNT - Rear Mount - Auto Trans		1.00	64.42	64.42
Labor 1	Work Requested - ENGINE MOUNT - Replace - Rear Mount		0.80	84.50	67.60

**"WE APPRECIATE ALL YOUR BUSINESS"**

Payment Date	Type	Method	Amount
1/8/2015	Check	#7252	341.91
Payment Totals:			<b>\$341.91</b>

Parts: \$114.96  
 Labor: \$194.35  
 Sublet: \$0.00  
 Misc: \$0.00  
 Hazmat: \$14.86  
 Supplies: \$17.74

Tax Total: \$0.00  
**Invoice Total: \$341.91**  
 Less Paid: 341.91  
 Balance Due: \$0.00



9272015

665060

# Ira Toyota Scion

161 Andover St. \* Rt. 114  
Danvers, MA 01923  
978-739-8333 \* 800-230-0982  
www.iramotorgroup.com

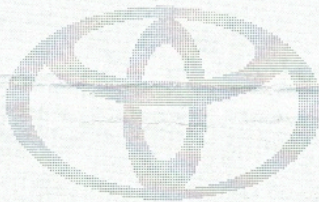
\*INVOICE\*

PAGE 1

SERVICE ADVISOR: 6441 ILANA SNYDERMAN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG
ABSOLUTELY	00	TOYOTA ECHO	JTDBT1235Y0097074		18512/18512	268..
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	PAYMENT	INV. DATE
14NOV00 IS					85.00 CASH	24NOV06
OPTIONS:			STK:TY4242 ENG:1NZ-FF			
08:36	24NOV06	09:17	24NOV06			

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A							
STATE INSPECTION							
SI STATE INSPECTION							
925 RODRIGUEZ, TROY LIC#: /							
CT						29.00	29.00
*****							
!!!!!!!!!!!!!!THANK YOU!!!!!!!!!!!!!!							
FOR							
CHOOSING IRA MOTOR GROUP							
!!!!!!!!!!!!!!							



# TOYOTA



NOV 24 2006

VISA

83

ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

In addition to the charges for parts, labor, tax, etc., Ira Toyota Scion also charges a "shop charge" as part of the repair bill. This "shop charge" is to help defray the costs of certain materials that cannot be accurately itemized, but which are generally used in the repair and service of vehicles. These items include, but are not limited to, rags, bolts, screws, hand cleaner, small amounts of lubricant, etc. This charge is calculated as a percentage of the total labor charge.

x \_\_\_\_\_

Replacement parts and tires are warranted for defects in material or workmanship by the manufacturer.

Please present your receipt and the vehicle to our Service Department during normal business hours.

DESCRIPTION	TOTALS
LABOR AMOUNT	29.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP CHARGE	0.00
TOTAL CHARGES	29.00
DISCOUNTS/DEDUCTIBLES	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	29.00

CUSTOMER COPY



9272015

618379

# Ira Toyota Scion

161 Andover St. \* Rt. 114  
Danvers, MA 01923  
978-739-8333 \* 800-230-0982  
www.iramotorgroup.com

\*INVOICE\*

PAGE 1

SERVICE ADVISOR: **HOGAN**

COLOR	YEAR	MAKE/MODEL	VIN		MILEAGE IN/ OUT	TAG
ABSOLUTELY	00	TOYOTA ECHO	JTDBT1235Y0097074		17703/17703	T272
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	PAYMENT	INV. DATE
14NOV00 IS			17APR06		85.00 CASH	17APR06

OPTIONS: STK:TY4242 ENG:1NZ-FF

08:35 17APR06 10:46 17APR06

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A INSPECT DRIVERS FLOOR PANEL FOR SURFACE RUST, DETERMINE IF FURTHER WORK IS REQUIRED. LOC/4620MF

CAUSE: RECALL

4620MA INSPECT FLOOR PAN AND APPLY SEALER KIT  
6756 RAPENELLI, SERGIO LIC#: /  
WT45

1 04004-67152 FLOOR SILENCER KIT

5 C0505-MS930-DS TEROSTAT SEALER MS-9

(N/C)  
(N/C)  
(N/C)

FC: RECALL PART#: COUNT:

CLAIM TYPE:

AUTH CODE:

C/R RECALL TECH VERIFIED RECALL TECH PERFORMED RECALL

\*\*\*\*\*

3 COURTESY INSPECTION

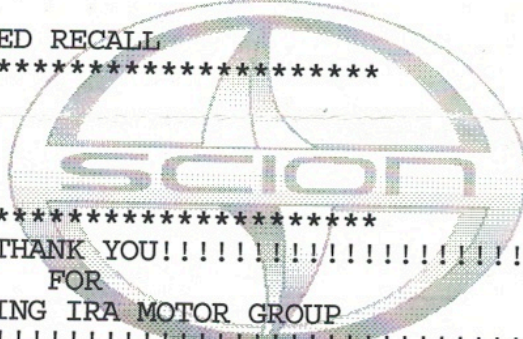
CI COURTESY INSPECTION

6756 RAPENELLI, SERGIO LIC#: /  
ISP

(N/C)

\*\*\*\*\*

!!!!!!!!!!!!!! THANK YOU !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!  
FOR  
CHOOSING IRA MOTOR GROUP  
!!



ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

In addition to the charges for parts, labor, tax, etc., Ira Toyota Scion also charges a "shop charge" as part of the repair bill. This "shop charge" is to help defray the costs of certain materials that cannot be accurately itemized, but which are generally used in the repair and service of vehicles. These items include, but are not limited to, rags, bolts, screws, hand cleaner, small amounts of lubricant, etc. This charge is calculated as a percentage of the total labor charge.

x \_\_\_\_\_

Replacement parts and tires are warranted for defects in material or workmanship by the manufacturer.

Please present your receipt and the vehicle to our Service Department during normal business hours.

DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP CHARGE	0.00
TOTAL CHARGES	0.00
DISCOUNTS/DEDUCTIBLES	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

CUSTOMER COPY



CUSTOMER #: 9272015

1010274

# Ira Toyota Scion

161 Andover St. \* Rt. 114  
Danvers, MA 01923  
978-739-8333 \* 800-230-0982  
www.iramotorgroup.com

\*INVOICE\*

PAGE 1

2015

SERVICE ADVISOR: 9530 SCOTT HERWIG

COLOR	YEAR	MAKE/MODEL	VIN		MILEAGE IN/OUT	TAG	
ABSOLUTELY	00	TOYOTA ECHO	JTDBT1235Y0097074		31112/31112	T704	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
14NOV00 IS							
14NOV00 DD			WAIT 18AUG11		VARIES	CASH	18AUG11

OPTIONS: STK:TY4242 ENG:1NZ-FF

09:53 18AUG11	12:28 18AUG11						
LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL

A CUST STATES THERE IS A LOUD ENGINE/EXHAUST TYPE NOISE, PLEASE CK AND ADVISE

FDIAG 1.0 FREE DIAGNOSIS  
5287 BEAULIEU,CHUCK LIC#: /  
IDIAG

(N/C)  
0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A:  
31112 FOUND CENTER PIPE AND THE MUFFLER ARE ROTTED THROUGH. THE EXH  
MANIFOLD FLANGE IS ROTTED BADLY.

B PERFORM 26-POINT INSPECTION OF VEHICLE. ADVISOR WILL ATTACH TOP COPY  
OF FORM TO YOUR INVOICE.

CI PERFORM 26-POINT INSPECTION OF VEHICLE.  
ADVISOR WILL ATTACH TOP COPY OF FORM TO YOUR  
INVOICE.

5287 BEAULIEU,CHUCK LIC#: /  
CT

0.00 0.00

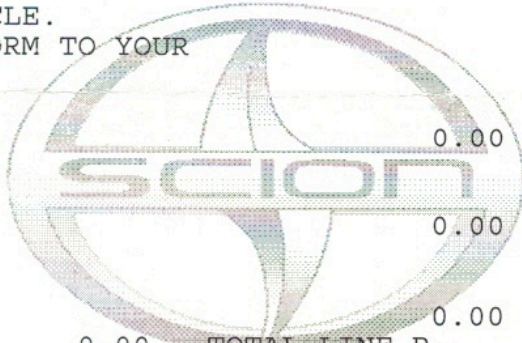
BR3 REARS ARE 3MM, FRONTS ARE 4MM  
5287 BEAULIEU,CHUCK LIC#: /  
CT

0.00 0.00

TR5 \*\*\*TIRES ARE 5/32\*\*\*  
5287 BEAULIEU,CHUCK LIC#: /  
CT

0.00 0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00



\* THANK YOU FOR CHOOSING IRA TOYOTA DANVERS \*  
TO SERVICE YOUR VEHICLE  
IF YOU ARE NOT 100% SATISFIED  
\*\*\* PLEASE CONTACT \*\*\*

CHARLIE ALICARDI, SERVICE DIRECTOR  
978-739-8391 calicardi@iramotorgroup.com  
OR LORRAINE

ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT  
UNLESS SPECIFIED OTHERWISE  
  
NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR  
ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY  
OTHER CAUSE BEYOND OUR CONTROL.

In addition to the charges for parts, labor, tax, etc., Ira Toyota Scion also charges a "shop charge" as part of the repair bill. This "shop charge" is to help defray the costs of certain materials that cannot be accurately itemized, but which are generally used in the repair and service of vehicles. These items include, but are not limited to, rags, bolts, screws, hand cleaner, small amounts of lubricant, etc. This charge is calculated as a percentage of the total labor charge.

Replacement parts & tires are warranted for defects in material or workmanship by the manufacturer.

Please present your receipt and the vehicle to our Service Department during normal business hours.

PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP CHARGE	0.00
TOTAL CHARGES	0.00
DISCOUNTS/DEDUCTIBLES	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00





**Meineke Car Care Center #398**  
**119 Rantoul Street**  
**Beverly, MA 01915**  
**(978)921-1577**

**Invoice Number: 18582**  
 Invoice Date: 10-17-11  
 Estimate ID: 036405  
 Invoice Code: 764109N763448S45

"Each Shop Individually Owned and Operated"  
 www.meineke.com

**SOLD TO:**

*repairs for Echo*



Vin

Tech EQ1    Writer \*\*\*    Ad Lead REPEAT

Quantity	Item	Description	Warranty	MAP	A/D	Unit Price	Total
<b>ALIGN&amp;TIRE</b>							
2.00	2700-74185	SWAY BAR LINK/KIT		A	A	21.00	42.00
1.00	LABOR	SHOP LABOR TO INSTALL SWAY BAR LINKS		A	A	90.00	90.00
<b>Job Total:</b>							<b>132.00</b>
<b>VIS&amp;SAFETY</b>							
1.00	ST1	MASS STATE INSPECTION		A	A	29.00	29.00
<b>Job Total:</b>							<b>29.00</b>

*installed front on car*

Chris, Paul and the staff at Meineke Beverly want to thank you for your patronage. Your satisfaction is very important to us.

Sales Tax 1: 2.78

**PAYMENT RECEIPT**

**Tap Code Legend**  
 =Sugg-Failure Likely  
 =Sugg-Customer Req.  
 =Sugg-Maintenance  
 =Sugg-Recommendation  
 =Req-Performance  
 =Req-Design Spec  
 =Req-Missing

**A/D Legend**  
 A=Accepted  
 D=Declined

Payment Method: Visa    Amount: 166.30

Shop Supplies:	2.52
Total Parts:	71.00
Total Labor:	90.00
Sub Total:	163.52
Sales Tax:	2.78
<b>Total Due:</b>	<b>\$166.30</b>

Printed: 10/17/2011 at 10:00:29AM

112840

ED BY X





TOWN FAIR TIRE CENTERS OF MASSACHUSETTS LLC  
 129-139 ENDICOTT ST., DANVERS, MA 01923 TEL (978) 777-8350

### INVOICE - Layaway Payment

INVOICE NO.  
40445-566

ACCOUNT NO. P.O. # [Redacted]

MI [Redacted] CURRENT MILEAGE 0 YEAR, MAKE, MODEL  
 MI [Redacted]  
 AC [Redacted]  
 CI [Redacted]

SALE TYPE	CLERK #	G.P. #	DATE	TIME		
09 Layaway Payment	366		02/11/2010	11:38		
QTY	SIZE	DESCRIPTION	IBM #	LIST	PRICE	AMOUNT

SIGNATURE	SUB-TOTAL	0.00
	MA SALES TAX	0.00
	NON-TAXABLE	0.00
	<b>TOTAL</b>	<b>0.00</b>

Layaway Balance 4.20  
 Cash 5.00  
 Change -0.80  
 New Balance 0.00

**SAFETY WARNING**  
 After installation of mag wheels, all nuts or bolts must be retorqued (tightened) after the first 25 miles.  
 CUSTOMER INITIALS \_\_\_\_\_

**COMMENTS - COMPLIMENTS - COMPLAINTS**  
 Town Fair serves thousands of customers each year. In order to help us serve you better, if you have a comment, compliment, or complaint or just want to talk to us about our operation - please call - it will be greatly appreciated.

Contact or Write  
 NEIL MELLEN, PRESIDENT TOWN FAIR TIRE  
 460 COE AVENUE EAST HAVEN, CT 06512  
 TELEPHONE (203)467-8600  
 OR TOLL FREE 1 (800) 972-2245 OR 1 (888) TOWNFAIR  
 OR VISIT OUR WEBSITE @ www.townfair.com

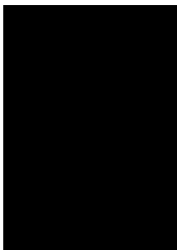


# Five Star Auto Repair

191 Essex St  
 Beverly, Massachusetts 01915  
 P (978) 922-9700 F (978) 927-4544

RED TOYOTA  
 ECHO

Estimate Creation Date: 02/27/2018 08:53



2000 Toyota Echo 1.5L, L4, USA/Canada  
 376LP8  
 Miles

Type	Description	Part# / OpCode / Tax Option	Qty / Hrs	Price	Total
Part	Suspension Strut Assembly coil spring bushing & mount left front	4851059396	1.00	\$296.66	\$296.66
Part	Suspension Strut Assembly coil spring bushing & mount right front	485105962	1.00	\$296.66	\$296.66
Labor	removed and replaced front strut assembly		1.00	\$245.00	\$245.00
<b>Battery R&amp;R</b>					<b>\$838.32</b>

Type	Description	Part# / OpCode / Tax Option	Qty / Hrs	Price	Total
Part	Battery installed	00544270635	1.00	\$119.95	\$119.95
Part	oil change & filter		1.00	\$29.95	\$29.95
Fee	state inspection	Non Taxed	1.00	\$35.00	\$35.00
					<b>\$184.90</b>

Parts Total: \$743.22  
 Labor Total: \$245.00  
 Shop Supplies: \$3.80  
 Hazardous Materials: \$1.20  
 Fees: \$35.00  
 Subtotal: \$1028.22  
 Sales Tax: \$46.45  
**Total: \$1074.67**

12 month warranty on parts and labor if defective only

signature: / / date: / /

pd. in full  
 2/28/18  
 C K # 7929





TOWN FAIR TIRE CENTERS OF MASSACHUSETTS LLC  
 129-139 ENDICOTT ST., DANVERS, MA 01923 TEL (978) 777-8350

**INVOICE**

INVOICE NO.  
40445-566

ACCOUNT NO. P.O. #

MR. MRS. MS. ADDRESS CITY ST

CURRENT MILEAGE 28451  
 YEAR, MAKE, MODEL 00 TOYOTA Echo  
 RED

SALE TYPE CLERK # G.P. # DATE TIME

QTY	SIZE	DESCRIPTION	IBM #	LIST	PRICE	AMOUNT
1	FIX FLAT	NEW VALVE & BALANCE	00153	14.95	3.95	3.95
1		FLAT REPAIR	00194	14.95	0.00	0.00

Free Flat Repair - The tire is removed from the wheel and thoroughly inspected. If the tire has a puncture wound, it will be repaired from the inside using a combination patch-plug. If the tire is leaking from the bead area, the tire and the rim are thoroughly cleansed and sealed with a bead sealant.

Due to the internal flat repair it is recommended to install a new valve stem and balance the tire before it is put back on the vehicle. The normal charge for these items is \$14.95 to \$19.95 depending on the rim diameter. The discounted price for the new valve stem and balancing the tire that has been repaired is only \$3.95.

Explanation: RR TIRE SLOW LEAK  
 TORQUE: 76 PSI--FR:32 RR:32  
 SIGNATURE

SUB-TOTAL	3.95
MA SALES TAX	0.25
NON-TAXABLE	0.00
<b>TOTAL</b>	<b>4.20</b>

away Deposit 0.00  
 balance Due 4.20

**SAFETY WARNING**  
 After installation of mag wheels, all nuts or bolts must be retorqued (tightened) after the first 25 miles.  
 CUSTOMER INITIALS \_\_\_\_\_

**COMMENTS - COMPLIMENTS - COMPLAINTS**  
 Town Fair serves thousands of customers each year. In order to help us serve you better, if you have a comment, compliment, or complaint or just want to talk to us about our operation - please call - it will be greatly appreciated.

Contact or Write  
 NEIL MELLEN, PRESIDENT TOWN FAIR TIRE  
 460 COE AVENUE EAST HAVEN, CT 06512  
 TELEPHONE (203)467-8600  
 OR TOLL FREE 1 (800) 972-2245 OR 1 (888) TOWNFAIR  
 OR VISIT OUR WEBSITE @ www.townfair.com





# Quality Vehicle Inspection

1- [Redacted] Year/Model: 00 Echo Date: 8-8-11  
 Mileage: 31,110 VIN: JTDBT123540097074 Repair Order #: 1010274  
 Assistant Service Manager: Scott Technician: \_\_\_\_\_

CHECKED AND OKAY			MAY NEED FUTURE ATTENTION			REQUIRES IMMEDIATE ATTENTION			
<b>INTERIOR/EXTERIOR</b>									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Head Lights / Tail Lights / Turn Signals / Brake Lights / Hazard Warning Lights / Exterior Lamps						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windshield Washer Spray / Wiper Operation / Wiper Blades Wiper Arms / Including Rear (if applicable)						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windshield Condition (Inspect for Cracks, Chips, or Pitting)						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upholstery / Carpet / Floor Mats / Mirrors / Glass						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Brake Adjustment						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Horn Operation						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Tank Cap Gasket						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air Conditioning Filter (if equipped)						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clutch Operation (if equipped)						<input type="checkbox"/>
<b>UNDER VEHICLE</b>									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shock Absorbers / Suspension						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Steering Gear Box / Linkage and Boots / Ball Joints / Dust Covers						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Muffler / Exhaust Pipes / Mountings						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine Oil and/or Fluid Leaks						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brake Lines / Hoses / Parking Brake Cable						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drive Shaft Boots / Constant Velocity Boots / U-joints / Transmission Linkage (if equipped)						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmission / Differential / Transfer Case (Check Fluid Level, Fluid Condition and Fluid Leaks)						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Lines and Connections / Fuel Tank Band / Fuel Tank Vapor Vent System Hoses						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspect Nuts and Bolts on Body Chassis						<input type="checkbox"/>
<b>UNDER HOOD</b>									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fluid Levels: Oil / Coolant / Battery / Power Steering / Brake Fluid / Washer / Automatic Transmission						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine Air Filter						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drive Belts (condition and adjustment)						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine Coolant Protection _____						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cooling System Hoses / Heater Hoses / Air Conditioning Hoses and Connections						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radiator Core / Air Conditioning Condenser (if equipped)						<input type="checkbox"/>

CHECKED AND OKAY			MAY NEED FUTURE ATTENTION			REQUIRES IMMEDIATE ATTENTION			
<b>BATTERY PERFORMANCE</b>									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Battery Terminals / Cables / Mountings						<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Condition of Battery (Storage Capacity Test) <i>Age</i>						<input type="checkbox"/>
<input type="checkbox"/> Pass			<input type="checkbox"/> Recharge Retest			<input type="checkbox"/> Fail			

BRAKE AND TIRE			
<b>Left Front</b>		<b>Right Front</b>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brake Lining <u>4</u> mm	<input type="checkbox"/>	Brake Lining <u>4</u> mm	<input type="checkbox"/>
Tire Tread <u>6</u> 32nds	<input type="checkbox"/>	Tire Tread <u>5</u> 32nds	<input type="checkbox"/>
Wear Pattern <u>cracks</u>	<input type="checkbox"/>	Wear Pattern	<input type="checkbox"/>
Tire Pressure <u>32</u> psi	<input type="checkbox"/>	Tire Pressure <u>32</u> psi	<input type="checkbox"/>
<b>Inspect Brake Lining</b>		<b>Inspect Tire Wear</b>	
<b>Left Rear</b>		<b>Right Rear</b>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brake Lining <u>3</u> mm	<input type="checkbox"/>	Brake Lining <u>3</u> mm	<input type="checkbox"/>
Tire Tread <u>6</u> 32nds	<input type="checkbox"/>	Tire Tread <u>7</u> 32nds	<input type="checkbox"/>
Wear Pattern <u>cracks</u>	<input type="checkbox"/>	Wear Pattern	<input type="checkbox"/>
Tire Pressure <u>32</u> psi	<input type="checkbox"/>	Tire Pressure <u>32</u> psi	<input type="checkbox"/>
<input type="checkbox"/> Brake Inspection Not Performed This Visit			

**COMMENTS**

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*Thank You*  
*Allen*

---



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# WINDHAM MOBIL SERVICE STATION

18 MAMMOTH RD.

Windham, NH 03087-0000

Shop Phone: (603) 594-2410

Fax: 594-2430

Email: WINDMOBIL@COMCAST.NET

Web Address: WWW.WINDHAMMOBIL.COM

WINDHAM MOBIL SERVICE CENTER

Time Promised:

2000 TOYOTA ECHO L4 1.5L 1497CC FI GAS N 1NZFE

VIN: JTDBT1235Y0097074

Mileage In: 39,058

Date Written: 09/30/2016

Written By:

Save Old Parts: No

Job Name

Description

Technician

Qty

List

Extended

EVAP TEST

SMOKE FUEL TANK AND HOSES

carl

Labor 1

Work Performed - SMOKE SERVICE PORT AND ACTIVATE SOLENOID.

LOCATE LEAK

Work Requested - CHECK EVAP SYSTEM TO

1.50

95.00

142.50

REPLACE CANISTER PURGE ASSEMBLY

AND FILLER TUBE

Part 77201-52060

PIPE

1.00

155.27

155.27

Part 77300-20010

CAP

1.00

29.56

29.56

Part 77740-52030

CANISTER ASSEMBLY

1.00

380.42

380.42

Job #1

Note/Title

NEEDS  
FILLER TUBE ASSEMBLY

CHARCOAL CANISTER W/ VSV SOLENOID

"WE APPRECIATE ALL Y

Sale

4100

Online

Online

12/17/14

0900001

1: \$

707.75

Appr Code: 66701Z

707.75

Estimate Copy  
Head: Y00

Payment Date  
10/4/2016

Type  
Credit

Method  
MasterCard

Payment Totals:

707.75

Sublet: \$0.00  
Misc: \$0.00  
Hazmat: \$0.00  
Supplies: \$0.00

Tax Total: \$0.00

Invoice Total: \$707.75

Less Paid: 707.75  
Balance Due: \$0.00

Invoice

38156

Estimate Ref #39,678

Date Printed: 10/04/2016

Printed Time: 12:09 pm





meineke Car Care Center #398

119 Rantoul Street  
Beverly, MA 01915  
(978)921-1577

Invoice Number: 17894

Invoice Date: 08-19-11

Estimate ID: 034845

Invoice Code: 763874U763750H4

"Each Shop Individually Owned and Operated"

SOLD TO:  www.meineke.com

Vehicle  
2000 TOYOTA ECHO

Odometer  
31,125

Tag  
MA 376LP8

Vin

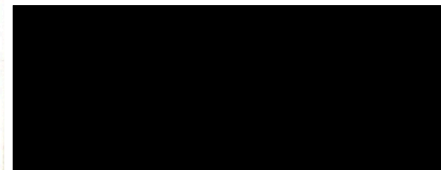
Tech  
EQ1

Writer  
\*\*\*

Ad Lead  
REPEAT

Quantity	Item	Description	Warranty	MAP	A/D	Unit Price	Total
<b>EXHAUST</b>							
1.00	IC5738	MUFFLER		A	A	266.56	266.56
1.00	MUFFLER LABO	MUFFLER LABOR		A	A	82.50	82.50
2.00	MISCPART	J HOOK	1 Year	A	A	8.99	17.98
1.00	1 P	PIPE		A	A	18.00	18.00
<b>Job Total:</b>							<b>385.04</b>

DATE: 08/19/2011 TIME: 10:30:06  
 MEINEKE 398  
 119 RANTOUL ST  
 BEVERLY, MA 01915  
 (978)921-1577  
 688398 - 1662  
 SHIFT# 1



TOTAL: \$419.83  
 X  
 MCGILLOWAY-JAMES  
 I AGREE TO PAY ABOVE TOTAL AMOUNT  
 ACCORDING TO CARD ISSUER AGREEMENT  
 CUSTOMER COPY

Chris, Paul and the staff at Meineke Beverly want to thank you for your patronage. Your satisfaction is very important to us.

Sales Tax 1: 19.84

**PAYMENT RECEIPT**

**Map Code Legend**  
 :Sugg-Failure Likely  
 :Sugg-Customer Req.  
 :Sugg-Maintenance  
 :Sugg-Recommendation  
 :Req-Performance  
 :Req-Design Spec  
 :Req-Missing


**A/D Legend**  
 A=Accepted  
 D=Declined

Visa	419.83
------	--------

Shop Supplies:	14.95
Total Parts:	302.54
Total Labor:	82.50
Sub Total:	399.99
Sales Tax:	19.84
<b>Total Due:</b>	<b>\$419.83</b>

Printed: 8/19/2011 at 10:29:45AM

112148

BY 



# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate

## RMV Division

PLATE TYPE <b>PAN</b>	REGISTRATION TYPE <b>PASSENGER</b>	EFFECTIVE DATE <b>09/01/15</b>	EXPIRES LAST DAY OF <b>08 17</b>	TRANSACTION NUMBER <b>92522200016022</b>
AFRS MODEL YEAR <b>2000</b>	BODY STYLE/TYPE <b>TOYT ECHO</b>	COLOR <b>SEDAN</b>	Not valid without official signature of Registrar	
VEHICLE IDENTIFICATION NUMBER <b>JTDBT1235Y0097074</b>	INSURANCE COMPANY <b>LIBERTY MUTUAL INS</b>	TITLE NUMBER <b>AV332837</b>	REGISTRAR <i>Chris C. Dewney</i>	
RESIDENTIAL ADDRESS (IF DIFFERENT)				

VAM <div style="background-color: black; width: 100%; height: 50px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 50px;"></div>	FEES <table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: right;">REGISTRATION</td><td style="text-align: right;">60.00</td></tr> <tr><td style="text-align: right;">TITLE</td><td style="text-align: right;">0.00</td></tr> <tr><td style="text-align: right;">SPECIAL PLATES</td><td style="text-align: right;">0.00</td></tr> <tr><td style="text-align: right;">SALES TAX</td><td style="text-align: right;">0.00</td></tr> <tr><td style="text-align: right;"><b>TOTAL</b></td><td style="text-align: right;"><b>60.00</b></td></tr> </table>	REGISTRATION	60.00	TITLE	0.00	SPECIAL PLATES	0.00	SALES TAX	0.00	<b>TOTAL</b>	<b>60.00</b>
REGISTRATION	60.00										
TITLE	0.00										
SPECIAL PLATES	0.00										
SALES TAX	0.00										
<b>TOTAL</b>	<b>60.00</b>										

**MASSACHUSETTS DEPARTMENT OF TRANSPORTATION  
REGISTRY OF MOTOR VEHICLES DIVISION**

The records of the RMV database constitute the official status of the vehicle registration.

SPECIAL MESSAGE IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.	CHANGE OF ADDRESS STREET ADDRESS <hr/> <hr/> CITY, STATE, ZIP CODE
---	--

### Important Information for Vehicle Owners

- Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place.
- By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: [www.massrmv.com](http://www.massrmv.com) or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- Return the registration plates to the RMV immediately if:
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the **Bill of Sale, Title**, and completed **Reassignment of Title** for your records to document the transfer.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

**Transferring Your Plates:** Massachusetts law (M.G.L. Chapter 90, Section 2) allows you to transfer **valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer** while you obtain insurance and a new registration. **All** the following must be met: **1.** You are at least 18 years of age and you own the motor vehicle or trailer identified on this *Registration Certificate*. **2.** You transfer ownership of this vehicle to another person or permanently lose possession of it (such as through repossession, etc.); **3.** The newly acquired vehicle is of the **same vehicle type** (passenger vehicle to passenger vehicle, trailer to trailer etc.); the **same registration type** (passenger to passenger, commercial to commercial); and has the **same number of wheels**; and, **4.** The **seller and buyer** properly complete the Assignment of the Certificate of Title (for the newly acquired "used" vehicle) or Certificate of Origin (if a "new" vehicle). If **all** the above are met, you may operate the newly acquired vehicle with the transferred plates **up to 5:00 pm of the 7th calendar day** following the date of transfer (or loss of possession). The day of transfer or loss is day #1. During that 7 days, you **must** carry the *Bill of Sale* (or the dealer's *Purchase Contract*) for the newly acquired vehicle **and** this *Registration Certificate* when operating the vehicle. See **FAQs About the Seven-Day Registration Transfer Law** on the RMV's website at [www.massrmv.com](http://www.massrmv.com).

**No Insurance Card Required:** Massachusetts's law does **not** require an Insurance card. The law, M.G.L. Chapter 90, Section 34A and Chapter 175, Section 113A requires the vehicle's owner to maintain a compulsory motor vehicle insurance policy or bond for bodily injury coverage and property damage insurance. If an insurer is identified on the face of this *Registration Certificate*, it is required by law to electronically notify the RMV (Registry of Motor Vehicles) if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.

### BE FIRST IN LINE BY GOING ONLINE AT [WWW.MASSRMV.COM](http://WWW.MASSRMV.COM)

- |                                 |                                  |
|---------------------------------|----------------------------------|
| Schedule a Road Test            | Request a Duplicate Title        |
| Renew Your Driver's License     | Request a Duplicate Registration |
| Renew Your Registration         | Change Your Address              |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration     |
| Replace Your Driver's License   | Order a Special Plate            |

### NEED TO VISIT AN RMV OFFICE?

**SAVE TIME  
Complete Your  
Application Online!**

**VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS**



# CERTIFICATE OF REGISTRATION

**RMV Division**

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate

PLATE TYPE <b>PAN</b>	REGISTRATION TYPE <b>PASSENGER</b>	EFFECTIVE DATE <b>09/01/13</b>	EXPIRES LAST DAY OF <b>08 15</b>	MONTH <b>08</b>	YEAR <b>15</b>	TRANSACTION NUMBER <b>92321300010051</b>
MFRS MODEL YEAR <b>2000</b>	TOY <b>TOYT</b>	MODEL <b>ECHO</b>	BODY STYLE/TYPE <b>SEDAN</b>	COLOR <b>RED</b>	Not valid without official signature of Registrar	
VEHICLE IDENTIFICATION NUMBER <b>JTDBT1235Y0097074</b>	INSURANCE COMPANY <b>LIBERTY MUTUAL INS</b>	TITLE NUMBER <b>AV332837</b>	REGISTRAR <i>Rachel Kaprielian</i>		IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.	
RESIDENTIAL ADDRESS (IF DIFFERENT)			TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.			
NAME(S) OF OWNER(S) AND MAILING ADDRESS			FEEES			
[REDACTED]			REGISTRATION 50.00			
			TITLE 0.00			
			SPECIAL PLATES 0.00			
			SALES TAX 0.00			
			TOTAL 50.00			

**MASSACHUSETTS DEPARTMENT OF TRANSPORTATION  
REGISTRY OF MOTOR VEHICLES DIVISION**

The records of the RMV database constitute the official status of the vehicle registration.

SPECIAL MESSAGE <b>IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.</b>	CHANGE OF ADDRESS
	STREET ADDRESS
	CITY, STATE, ZIP CODE

### Important Information for Vehicle Owners

- Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place.
- By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: [www.mass.gov/rmv](http://www.mass.gov/rmv) or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- Return the registration plates to the RMV immediately if:
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the **Bill of Sale, Title**, and completed **Reassignment of Title** for your records to document the transfer.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.



**Transferring Your Plates:** Massachusetts law (M.G.L. Chapter 90, Section 2) allows you to transfer **valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer** while you obtain insurance and a new registration. **All** the following must be met: **1.** You are at least 18 years of age and you own the motor vehicle or trailer identified on this *Registration Certificate*. **2.** You transfer ownership of this vehicle to another person or permanently lose possession of it (such as through repossession, etc.); **3.** The newly acquired vehicle is of the **same vehicle type** (passenger vehicle to passenger vehicle, trailer to trailer etc.); the **same registration type** (passenger to passenger, commercial to commercial); and has the **same number of wheels**; and, **4.** The **seller and buyer** properly complete the Assignment of the Certificate of Title (for the newly acquired "used" vehicle) or Certificate of Origin (if a "new" vehicle). If **all** the above are met, you may operate the newly acquired vehicle with the transferred plates **up to 5:00 pm of the 7th calendar day** following the date of transfer (or loss of possession). The day of transfer or loss is day #1. During that 7 days, you **must** carry the *Bill of Sale* (or the Dealer's *Purchase Contract*) for the newly acquired vehicle **and** this *Registration Certificate* when operating the vehicle. See **FAQs About the Seven-Day Registration Transfer Law** on the RMV's website at [www.mass.gov/rmv](http://www.mass.gov/rmv).

**No Insurance Card Required:** Massachusetts's law does **not** require an Insurance card. The law, M.G.L. Chapter 90, Section 34A and Chapter 175, Section 113A requires the vehicle's owner to maintain a compulsory motor vehicle insurance policy or bond for bodily injury coverage and property damage insurance. If an insurer is identified on the face of this *Registration Certificate*, it is required by law to electronically notify the RMV (Registry of Motor Vehicles) if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.

## BE FIRST IN LINE BY GOING ONLINE AT [WWW.MASS.GOV/RMV](http://WWW.MASS.GOV/RMV)

- |                                 |                                  |
|---------------------------------|----------------------------------|
| Schedule a Road Test            | Request a Duplicate Title        |
| Renew Your Driver's License     | Request a Duplicate Registration |
| Renew Your Registration         | Change Your Address              |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration     |
| Replace Your Driver's License   | Order a Special Plate            |

### NEED TO VISIT AN RMV OFFICE?

**SAVE TIME  
Complete Your  
Application Online!**

VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS



# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate **RMV Division**

PLATE TYPE <b>PAN</b>	REGISTRATION TYPE <b>PASSENGER</b>	EFFECTIVE DATE <b>09/01/11</b>	EXPIRES LAST DAY OF <b>08 13</b>	MONTH	YEAR	TRANSACTION NUMBER <b>92120900014046</b>
MFRS MODEL YEA. <b>2000</b>	MODEL <b>TOYT</b>	BODY STYLE/TYPE <b>ECHO</b>	COLOR <b>SEDAN</b>		RED	
VEHICLE IDENTIFICATION NUMBER <b>JTDBT1235Y0097074</b>		INSURANCE COMPANY <b>LIBERTY MUTUAL INS</b>		TITLE NUMBER <b>AV332837</b>		REGISTRAR <i>Rachel Kaprielian</i>
RESIDENTIAL ADDRESS (IF DIFFERENT)						IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.  TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.
NAME(S) OF OWNER(S) AND MAILING ADDRESS						
000945						<b>FEES</b>  REGISTRATION 50.00 TITLE 0.00 SPECIAL PLATES 0.00 SALES TAX 0.00 <b>TOTAL 50.00</b>
<b>MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES DIVISION</b> The records of the RMV database constitute the official status of the vehicle registration.						

SPECIAL MESSAGE IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.	CHANGE OF ADDRESS  STREET ADDRESS   CITY, STATE, ZIP CODE
---	--

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|---------------------------------|----------------------------------|
| Schedule a Road Test            | Request a Duplicate Title        |
| Renew Your Driver's License     | Request a Duplicate Registration |
| Renew Your Registration         | Change Your Address              |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration     |
| Replace Your Driver's License   | Order a Special Plate            |

**NEED TO VISIT AN RMV OFFICE?**

**SAVE TIME**  
**Complete Your Application Online!**

VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS



# Vehicle Inspection Report

**Please Review This Important Information**

Your vehicle has **PASSED** its **SAFETY TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

**Overall Result: PASS**

Safety Result PASS  
 Emissions Result N/A  
 Start Test Date/Time 2/27/2018 8:17 AM  
 End Test Date/Time 2/27/2018 8:27 AM  
 Test Type Regular  
 Sticker Number 190802196  
 Inspection Type Retest  
 Inspection Counter 2

**Vehicle Information**

VIN JTDBT1235Y0097074  
 License Plate [REDACTED]  
 Plate Type/State [REDACTED]  
 Vehicle Type [REDACTED]  
 Year / Make [REDACTED]  
 Model ECHO  
 Fuel Type GASOLINE  
 Engine Cyl / Size 4 / 1.5L  
 GVWR 8500  
 Odometer 40315

**Station Information**

NDRN INC. DBA X & L'S SER  
 191 ESSEX ST

**Inspection Fee****\$0.00****Safety Inspection Results**

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

**Inspection Comments**

None

**IR Number**

Scan to visit website







# Vehicle Inspection Report

## Please Review This Important Information

**Your vehicle has FAILED its SAFETY TEST.** Here is what you need to do now:

\* Fix safety defects immediately. Do not drive your vehicle until repairs are made.

\* Have your repaired vehicle re-tested within 60 days of your initial inspection. The first re-test is free at the original inspection station during this period. If your vehicle does not pass a re-test within 60 days of its initial inspection, RMV may suspend your registration.

If you have questions about your vehicle's inspection, please visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	FAIL	Vehicle Information		Station Information
Safety Result	FAIL	VIN	JTDBT1235Y0097074	NDRN INC. DBA X & L'S SER
Emissions Result	N/A	License Plate	[REDACTED]	[REDACTED]
Start Test Date/Time	2/24/2018 3:32 PM	Plate Type/State	[REDACTED]	[REDACTED]
End Test Date/Time	2/24/2018 3:39 PM	Vehicle Type	[REDACTED] ER	[REDACTED]
Test Type	Regular	Year / Make	2000 Toyota	[REDACTED]
Sticker Number	190802185	Model	ECHO	[REDACTED]
Inspection Type	Initial	Fuel Type	GASOLINE	Workstation Number MAW00000123
Inspection Counter	1	Engine Cyl / Size	4 / 1.5L	Inspector Number *****0681
		GVWR	8500	
		Odometer	40315	

<b>Inspection Fee</b>	<b>\$35.00</b>
-----------------------	----------------

### Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	FAIL
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

### Inspection Comments

BROKEN SPRING

IR Number



Scan to visit website







163017228

# Vehicle Inspection Report

## Please Review This Important Information

Congratulations. Your vehicle has **PASSED** its **SAFETY TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call the **Motorist Hotline** at **1-866-941-6277**. The Hotline is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	Pass	Vehicle Information		Station Information	
Safety Result	Pass	VIN	JTDBT1235Y0097074	Name:	AMERICAN PETROLEUM INC
Emissions Result	N/A	License Plate	[REDACTED]	Address:	586 CABOT ST
Test Date	9/3/2015	Plate Type/State	[REDACTED]		BEVERLY, MA 01915
Test Time	12:00:44PM	Vehicle Type	[REDACTED]		978-922-9749
Test Type	Regular	Year / Make	2000 TOYOTA	Station Number	PB020770
Sticker Number	163017228	Model	ECHO	Workstation Number	ST000796
Inspection Type	Initial	Fuel Type	Gasoline	Inspector Number	*****8258
Inspection Count	1	GVWR	8500	Test Fee	\$35.00
		Odometer	37447		

## Safety Inspection Results

Visual Plate Check	Pass	Service Brakes	Pass	Horn Check	Pass
Stop and Tail Lights Check	Pass	Headlamp Check	Pass	Lighting/Reflector Check	Pass
Directional Lights Check	Pass	Frontend Check	Pass	Suspension Check	Pass
Frame Check	Pass	Wipers and Cleaner Check	Pass	Safety Belts Check	Pass
Air Bags Check	Pass	Exhaust Check	Pass	Window Tint Check	Pass
Windshield Check	Pass	Rear View Mirror Check	Pass	Bumpers/Fenders Check	Pass
Fuel Tank Fill Cap Check	Pass	Fuel Tank Fill Neck Check	Pass	Visible Smoke Check	Pass
Vehicle Height Check	Pass	Tires Check	Pass	Parking Brake Check	Pass
Other	Pass				

## Safety Inspection Comments







# Vehicle Inspection Report

## Please Review This Important Information

Congratulations. Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call the **Motorist Hotline** at **1-866-941-6277**. The Hotline is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	Pass	Vehicle Information		Station Information	
Safety Result	Pass	VIN	JTDBT1235Y0097074	Name:	AMERICAN PETROLEUM INC
Emissions Result	Pass	License Plate	376LP8	Address:	586 CABOT ST
Test Date	10/23/2012	Plate Type/State	PAN / MA		BEVERLY, MA 01915
Test Time	2:24:57PM	Vehicle Type	Passenger		978-922-9749
Test Type	Regular	Year / Make	2000 TOYOTA		
Sticker Number	134311605	Model	ECHO	Station Number	PB020770
Inspection Type	Initial	Fuel Type	Gasoline	Workstation Number	ST000796
Inspection Count	1	Engine Cyl/Size	4/ 1.5	Inspector Number	****2490
		GVWR	8500	Test Fee	\$29.00
		Odometer	33224		

## Safety Inspection Results

Visual Plate Check	Pass	Service Brakes	Pass	Horn Check	Pass
Stop and Tail Lights Check	Pass	Headlamp Check	Pass	Lighting/Reflector Check	Pass
Directional Lights Check	Pass	Frontend Check	Pass	Suspension Check	Pass
Frame Check	Pass	Wipers and Cleaner Check	Pass	Safety Belts Check	Pass
Air Bags Check	Pass	Exhaust Check	Pass	Window Tint Check	Pass
Windshield Check	Pass	Rear View Mirror Check	Pass	Bumpers/Fenders Check	Pass
Fuel Tank Fill Cap Check	Pass	Fuel Tank Fill Neck Check	Pass	Visible Smoke Check	Pass
Vehicle Height Check	Pass	Tires Check	Pass	Parking Brake Check	Pass
Other	Pass				

## Safety Inspection Comments

## On-Board Diagnostic (OBD) Test Results

OBD Tampering Check	Pass	OBD Connector Result	Pass	OBD MIL Status Result	Pass
OBD Key-On Bulb Check	N/A	OBD Communication Result	Pass	OBD Readiness Monitor Result	Pass
OBD Engine-Running Bulb Check	N/A	OBD RPM Check	Pass	OBD Test QA Check	
OBD Scan Tool Check Result	N/A	Pin 16 Volts Check	13.8		

## On-Board Diagnostic (OBD) Monitor Results

Catalyst Monitor	Ready
Catalyst Heater Monitor	Not Supported





**VEHICLE CHECK**

Cleaner Air • Safer Roads



114331618

# Vehicle Inspection Report

## Please Review This Important Information

Congratulations. Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call the **Motorist Hotline** at **1-866-941-6277**. The Hotline is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	Pass	Vehicle Information		Station Information	
Safety Result	Pass	VIN	JTDBT1235Y0097074	Name:	AMERICAN PETROLEUM INC
Emissions Result	Pass	License Plate		Address:	586 CABOT ST
Test Date	9/15/2010	Plate Type/State			BEVERLY, MA 01915
Test Time	10:25:11AM	Vehicle Type			978-922-9749
Test Type	Regular	Year / Make	2000 TOYOTA	Station Number	PB020770
Sticker Number	114331618	Model	ECHO	Workstation Number	ST000796
Inspection Type	Initial	Fuel Type	Gasoline	Inspector Number	****6943
Inspection Count	1	Engine Cyl/Size	4/ 1.5	Test Fee	\$29.00
		GVWR	8500		
		Odometer	29450		

## Safety Inspection Results

Visual VIN Check	Pass	Visual Plate Check	Pass	Service Brakes	Pass
Horn Check	Pass	Stop and Tail Lights Check	Pass	Headlamp Check	Pass
Lighting/Reflector Check	Pass	Directional Lights Check	Pass	Frontend Check	Pass
Suspension Check	Pass	Frame Check	Pass	Wipers and Cleaner Check	Pass
Safety Belts Check	Pass	Air Bags Check	Pass	Exhaust Check	Pass
Window Tint Check	Pass	Windshield Check	Pass	Rear View Mirror Check	Pass
Bumpers/Fenders Check	Pass	Fuel Tank Fill Cap Check	Pass	Fuel Tank Fill Neck Check	Pass
Visible Smoke Check	Pass	Vehicle Height Check	Pass	Tires Check	Pass
Parking Brake Check	Pass	Other	Pass		

## Safety Inspection Comments

## On-Board Diagnostic (OBD) Test Results

OBD Tampering Check	Pass	OBD Connector Result	Pass	OBD MIL Status Result	Pass
OBD Key-On Bulb Check	N/A	OBD Communication Result	Pass	OBD Readiness Monitor Result	Pass
OBD Engine-Running Bulb Check	N/A	OBD RPM Check	Pass	OBD Test QA Check	
OBD Scan Tool Check Result	N/A	Pin 16 Volts Check	13.8		

## On-Board Diagnostic (OBD) Monitor Results

Catalyst Monitor	Ready
Catalyst Heater Monitor	Not Supported





**VEHICLE CHECK**

Cleaner Air • Safer Roads



107860127

# Vehicle Inspection Report

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Overall Result:		Pass		Vehicle Information		Station Information	
Safety Result	Pass	VIN	JTDBT1235Y0097074	Name:	IRA TOYOTA		
Emissions Result	Pass	License Plate	[REDACTED]	Address:	161B ANDOVER STREET		
Test Date	10/13/2009	Plate Type/State	[REDACTED]		DANVERS, MA 01923		
Test Time	12:06:13PM	Vehicle Type	[REDACTED]		978-739-8333		
Test Type	Regular	Year / Make	2000 TOYOTA	Station Number	PB004934		
Sticker Number	107860127	Model	ECHO	Workstation Number	ST000511		
Inspection Type	Initial	Fuel Type	Gasoline	Inspector Number	****7026		
Inspection Count	1	Engine Cyl/Size	4/ 1.5	Test Fee	\$29.00		
		GVWR	8500				
		Odometer	27652				

## Safety Inspection Results

Visual VIN Check	Pass	Visual Plate Check	Pass	Service Brakes	Pass
Horn Check	Pass	Stop and Tail Lights Check	Pass	Headlamp Check	Pass
Lighting/Reflector Check	Pass	Directional Lights Check	Pass	Frontend Check	Pass
Suspension Check	Pass	Frame Check	Pass	Wipers and Cleaner Check	Pass
Safety Belts Check	Pass	Air Bags Check	Pass	Exhaust Check	Pass
Window Tint Check	Pass	Windshield Check	Pass	Rear View Mirror Check	Pass
Bumpers/Fenders Check	Pass	Fuel Tank Fill Cap Check	Pass	Fuel Tank Fill Neck Check	Pass
Visible Smoke Check	Pass	Vehicle Height Check	Pass	Tires Check	Pass
Parking Brake Check	Pass	Other	Pass		

## Safety Inspection Comments

## On-Board Diagnostic (OBD) Test Results

OBD Tampering Check	Pass	OBD Connector Result	Pass	OBD MIL Status Result	Pass
OBD Key-On Bulb Check	N/A	OBD Communication Result	Pass	OBD Readiness Monitor Result	Pass
OBD Engine-Running Bulb Check	N/A	OBD RPM Check	Pass	OBD Test QA Check	
OBD Scan Tool Check Result	N/A				
Pin 16 Volts Check	14.0				

## On-Board Diagnostic (OBD) Monitor Results

Catalyst Monitor      Ready