

PROPERTY DAMAGE RELEASE

Under the Equitable Rights of Subrogation

KNOW ALL MEN BY THESE PRESENTS:

That the Undersigned County of Hidalgo Individually, for sole consideration of one thousand two hundred ninety one Dollars and 95/100 (\$1,291.95) to be paid to County of Hidalgo do/does hereby and for my/our/its heirs, executors, administrators, successors and assigns release, acquit and forever discharge HOME STATE COUNTY MUTUAL INSURANCE COMPANY, SNAP Insurance Service LLC, and Ana Santibanez and his, her, their, or its agents, servants, successors, heirs, executors, administrators and all other persons, firms, corporations, associations or partnerships of and from this action, or claim, which the Undersigned County of Hidalgo now has/have or which may hereafter accrue on account of or in any way growing out of this property damage and the consequences thereof from the occurrence on or about the 29 day of May 2024, at or near McAllen, TX.

It is understood and agreed that this settlement is the compromise of a doubtful and disputed claim, and that the payment made is not to be construed as an admission of liability on the part of the party or parties hereby released, and that said releases deny liability therefore and intend merely to avoid litigation and buy their peace.

The undersigned further declare(s) and represent(s) that no promise, inducement or agreement not herein expressed has been made to the undersigned, and that this Release contains the entire agreement between the parties hereto, and that terms of this Release are contractual and not a mere recital.

THE UNDERSIGNED HAS READ THE FOREGOING RELEASE AND FULLY UNDERSTANDS IT.

Signed, sealed and delivered this _____ day of _____, 20____.

Printed Name Title Signature
Authorized Agent by and for _____

STATE OF _____
COUNTY OF _____

On the ____ day of _____, 20__ before me personally appeared _____

_____ to me known to be the person(s) named herein and who executed the foregoing Release and _____ acknowledged to me that _____ voluntarily executed the same.

My term expires _____, _____

Claim No.: 2024-HSTX06585

Your claim #

EstID: 305
 Serial No:
 Status: Preliminary

Date: 08.06.2024
 Time: 11:08:38

ER Paint Shop

2420 west Montecristo rd.
 Edinburg Texas 78541
 (956)386-0008 Fax: (956)289-1939
 Email: eloytrevino2@outlook.com
 Tax Id No: 05-0548446

ESTIMATE

Written By ER PAINT SHOP & MECHAN

10060

ADMIN INFORMATION

sheriff dept

OWNER

sheriff dept

Phone:
 : 956-383-8114
 : - -
 : - -

LOSS DATA

Veh Condition:
 Type of Loss:
 Point of Impact:
 Days To Repair:

INSURANCE

Insured:
 Ins Co:
 Adjuster:
 Phone: - - x
 Claim No:
 Policy No:
 Date of Loss: . .

VEHICLE INFORMATION

2021 CHEVROLET Silverado 1500 LTZ Crew Cab 4WD

VIN: 1GCUYGED5MZ10425B
 Colour: Clear Coat

Prod Date:
 Engine: 3.0-L L-6 DOHC 16V

Lic Plate:
 Odometer: 0

LINE ITEM DETAILS

Line	Description	Material	Price	Quantity	Total
FRONT BUMPER					
1	Overhaul	Front Bumper O/H			
2	Replace 1	Bumper Face Bar-Chrome	New 815.95		3.2
GRILLE					
3	R&I	Grille			1.0
FRONT LAMPS					
4	R&I	Lt Combination Lamp Assy			0.9
5	R&I	Rt Combination Lamp Assy			0.9
6	R&I	4 sensors			1.0
Line Totals -->			815.95		7.0 0.0

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Est ID: 305
 Lic No:
 Status: Preliminary

Date: No
 Time: 11:08

ER Paint Shop
 sheriff dept 2021 CHEV Silverado 15

ESTIMATE

FINAL SUMMARY TOTALS

LABOR:

Body	7.0	Hrs @	68.00	Per Hour	=	476.00
Refinish	0.0	Hrs @	68.00	Per Hour	=	
Frame/Structural	0.0	Hrs @	85.00	Per Hour	=	
Mechanical	0.0	Hrs @	165.00	Per Hour	=	

PARTS & MATERIAL:

Parts					=	815.95
Paint Material/Supplies	0.0	Hrs @	50.00	Per Hour	=	
Body Material	0.0	Hrs @	15.00	Per Hour	=	

OTHER CHARGES:

SUBTOTAL					=	1,291.95
Sales Tax on 0.00					=	0.00
TOTAL					\$	1,291.95

- NOTICE -

This estimate report is based upon our visual inspection and includes only the items listed on this report for repairs. Occasionally, after repair work is started, hidden or missed damage is found and additional costs may be necessary. All parts prices subject to actual invoice. This estimate report is valid for 60 days.

I hereby authorize repairs to my vehicle for the amount of this estimate.

Signed: _____ Date: _____