

PART ORDER

Customer Number: _____

Order Date: _____

PART 1:	REQUESTED MILES:
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WARRANTY:	PRICE:
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PART 2:	REQUESTED MILES:
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WARRANTY:	PRICE:
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CUSTOMER #:	CONTACT:	INITIAL:
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VEHICLE YEAR:	ENGINE:
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MAKE:	VIN:
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MODEL:	MILES:
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DRIVE:	NOTES:
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TRANS ID #:	
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PRODUCTION DATE:	
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SHIP TO:

ADDRESS:


CITY, STATE, ZIP:

PHONE:	FAX:	CONTACT:
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RO #:	Customer Name:
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PO #:	CC#:
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ETA:	EXPIRATION:	VCODE:
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[Core? Yes No] [HD  OR STOCK] [W/ PTO  OR W/O PTO] [STUD COUNT: 

OTHER INFORMATION: 

INVOICE #:	liftgate needed?
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