

## Recycled Parts Request: **VAN FORM**

Date: \_\_\_\_\_

Please note: Rocki Top Auto does not accept returns on Body Cuts

To: \_\_\_\_\_

From: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Year: \_\_\_\_\_

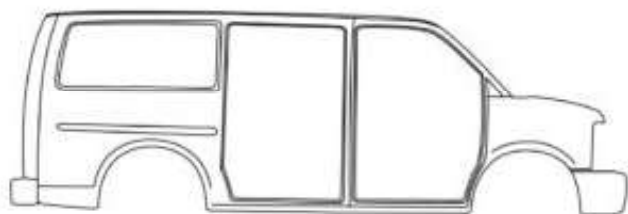
Make: \_\_\_\_\_

Model: \_\_\_\_\_

VIN #: \_\_\_\_\_

P.O. #: \_\_\_\_\_

Build Date: \_\_\_\_\_

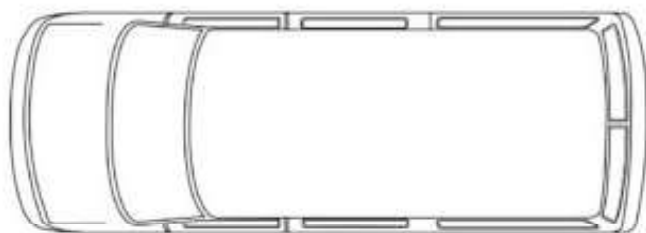


PASSENGER SIDE

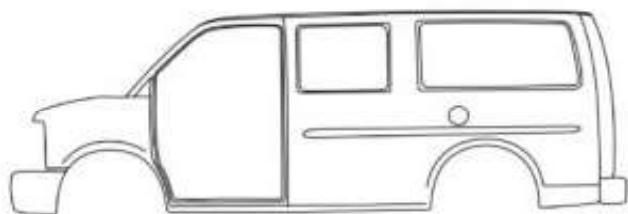


Please use the area below for a detail of cut instructions:

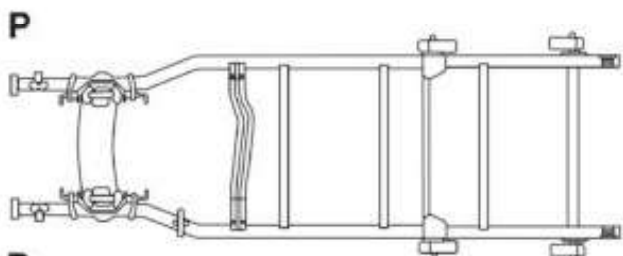
Notes:



TOP VIEW



DRIVER SIDE



D

UNDERBODY VIEW