## Recycled Parts Request: REGULAR CAB TRUCK FORM

Date:	
To:	From:
Contact Person:	Contact Person:
Phone #:	Fax #:
	Make:
	VIN #:
P.O. #:	Build Date:
PASSENGER SIDE	
TOP VIEW	Please use the area below for a detail of cut instructions:  Indicate the depth of the cut into the floor"  Please sign below to authorize this cut panel.  Cut panels are special orders and can not be returned.
	Signature of client :Notes:
DRIVER SIDE	
UNDERBODY VIEW	·