

Recycled Parts Request: **QUAD CAB TRUCK FORM**

Date: _____

To: Tom's Foreign Auto Parts _____

From: _____

Contact Person: _____

Contact Person: _____

Phone #: Fax: 203-755-4698 _____

Fax #: _____

Year: _____

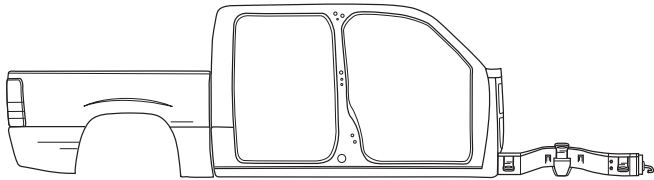
Make: _____

Model: _____

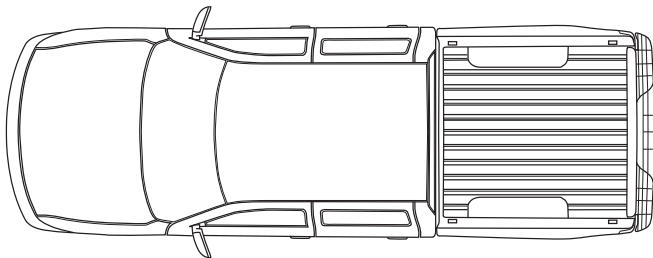
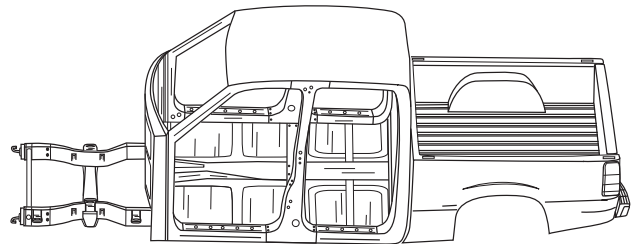
VIN #: _____

P.O. #: _____

Build Date: _____

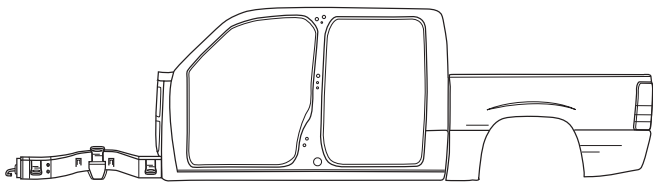


PASSENGER SIDE



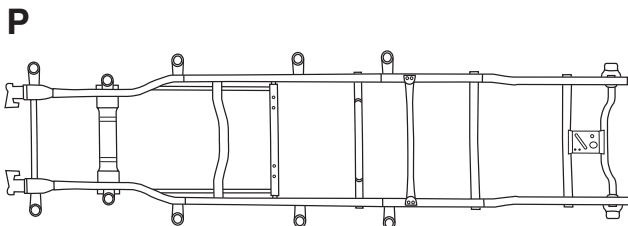
TOP VIEW

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



DRIVER SIDE

Notes:



P
D
UNDERBODY VIEW