## Please fill out this form as completely as possible when submitting items for restoration.

Address 2:
City:  State/Province:  ZIP/Postal Code:
Address 2:  City:  State/Province:  ZIP/Postal Code:
City:  State/Province:  ZIP/Postal Code:
State/Province: ZIP/Postal Code:
Countwy
Country:
Home phone #:
Work phone #:
Fax #:
E-mail:
Web site:
My vehicle is a:
CarTruck Other (please specify):
Year: 19
Make:
Model/Series:
With:
Engine:,cu. in.
Transmission:Standard,speed
Automatic
Air conditioning:YesNo
COMMENTS/SPECIAL INSTRUCTIONS (use back of sheet if necessary):