

**Recycled Parts Request: SPORT UTILITY VEHICLE FORM**

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

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

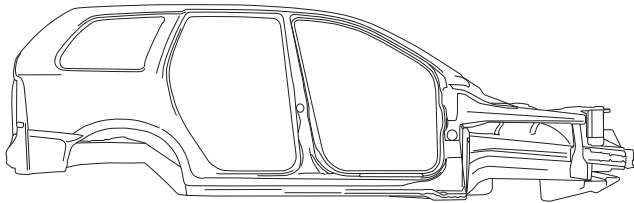
Contact Person: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

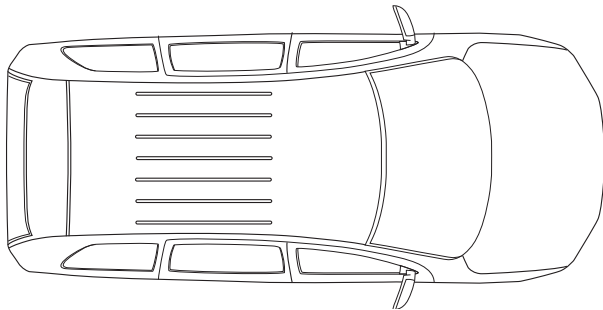
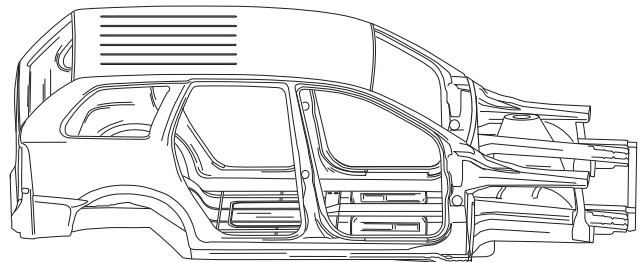
Year: \_\_\_\_\_ Make: \_\_\_\_\_

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

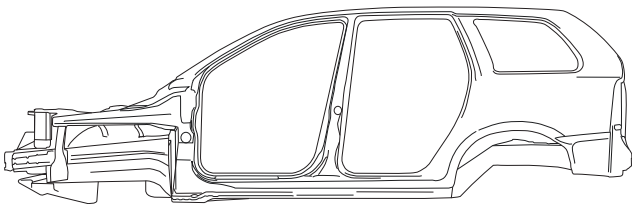
P.O. #: \_\_\_\_\_ Build Date: \_\_\_\_\_



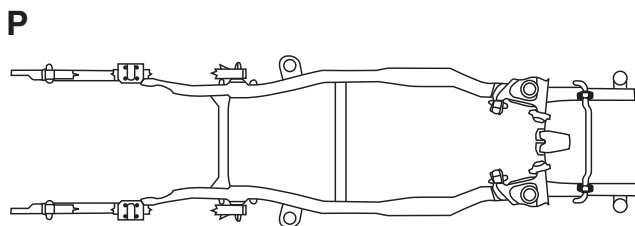
PASSENGER SIDE



TOP VIEW



DRIVER SIDE



**D**

TOP VIEW

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

Notes:

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