

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

Date: _____

To: _____

Contact Person: _____

Phone #: _____

Year: _____

Model: _____

P.O. #: _____

K&P Auto Dismantlers, Inc.

From: **Fax Back: 909.428.4139**

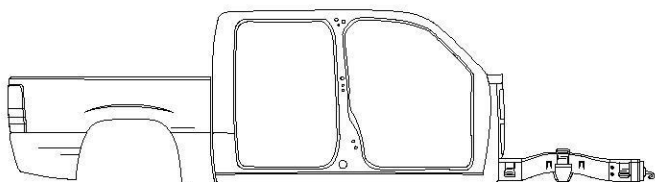
Phone: 909.428.6898

Fax #: _____

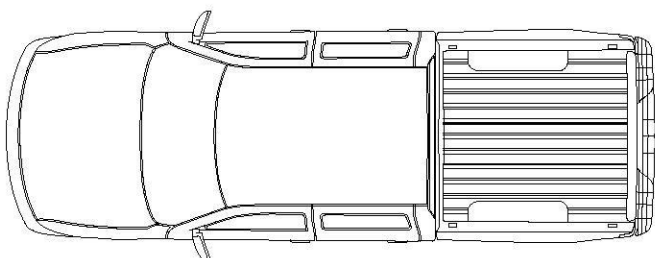
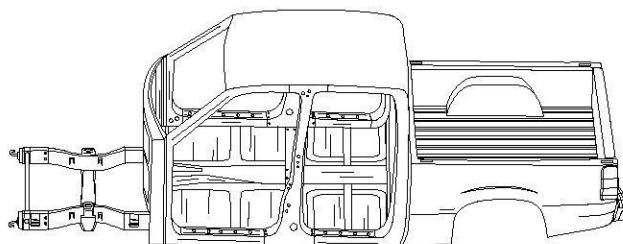
Make: _____

VIN #: _____

Build Date: _____

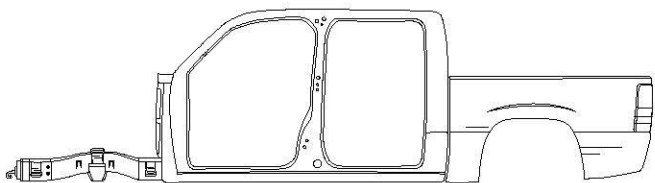


PASSANGER SIDE



TOP VIEW

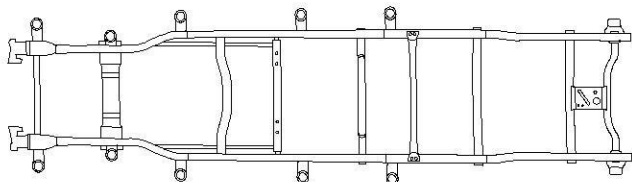
Please use the area below for a detail of cut instructions:



DRIVER SIDE

Notes:

P



D

TOP VIEW