

# VAN FORM

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

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

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

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

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

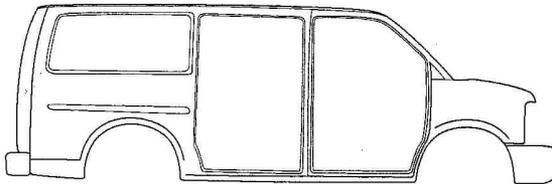
Phone #: \_\_\_\_\_

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

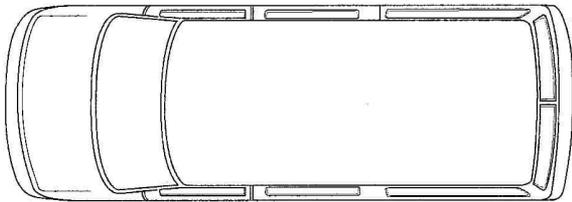
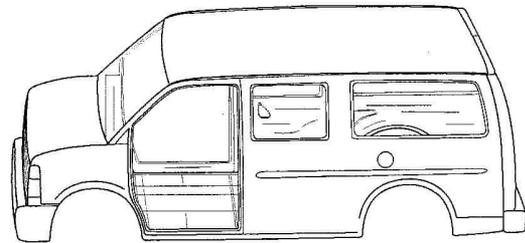
Year: \_\_\_\_\_

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

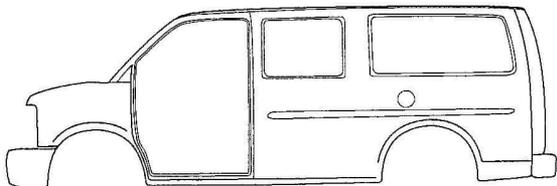
Model: \_\_\_\_\_



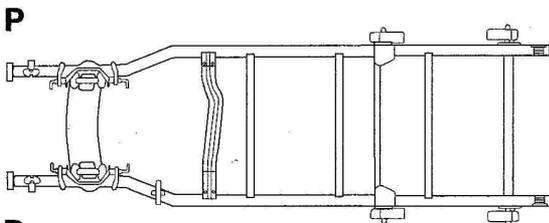
PASSANGER SIDE



TOP VIEW



DRIVER SIDE



TOP VIEW

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

Notes:

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**B AND H USED AUTO PARTS**  
56-01 PRESTON COURT  
BROOKLYN, NY 11234  
PH # 718-251-2626  
FAX # 718-251-2130