



Repair Order Instruction Sheet

Customer Information:

Name: _____

Address: _____

City: _____ State: ____ Zip Code: _____

Home Number: () -

Business Number: () -

Fax Number: () -

Cell Number: () -

Shock Part number (s): _____

Vehicle Information: _____

Revalve Specifications/ Work Request Information:

Method of Payment:

Cash/Check/Credit Card – Will contact for credit card information upon completion of service.

Credit Cards Accepted:

Visa, MasterCard, Amex and Discover

Special Instructions:

Method of return shipping will be UPS Ground unless otherwise specified