



4-DOOR FULL FRAME FORM

Date: _____

From: _____

Contact Person: _____

Fax #: _____

Make: _____

VIN: _____

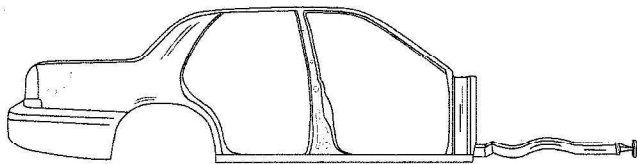
Build Date: _____

Phone #: _____

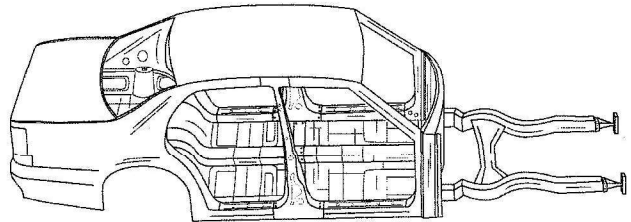
Year: _____

Model: _____

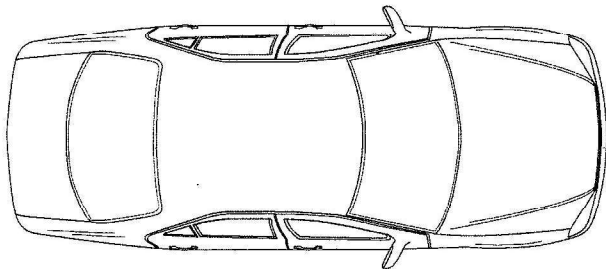
PO #: _____



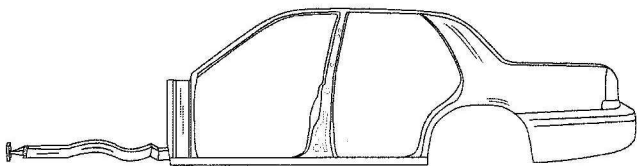
PASSENGER SIDE



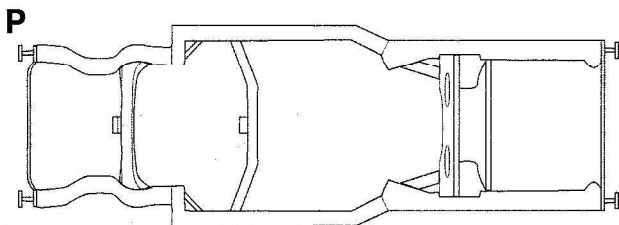
Please use the area below for a detail of cut instructions:



TOP VIEW



DRIVER SIDE



P

D

TOP VIEW

Notes: