

Fleet Name

Vehicle Mileage

Truck Unit #

Email Address

VIN #  
(required field)

Phone Number

Max Engine RPM  
(required field)

R.O. Number

Top Gear Ratio  
of Transmission  
(required field)

Case Number

**Print****Exit****Comments**



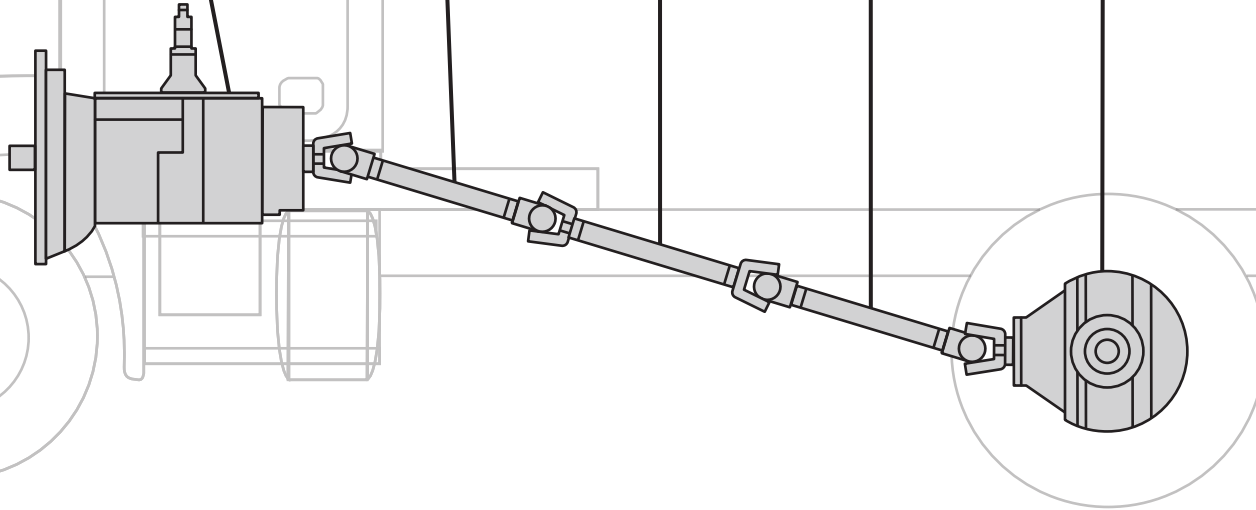
Side Angle 1

Side Angle 2

Side Angle 3

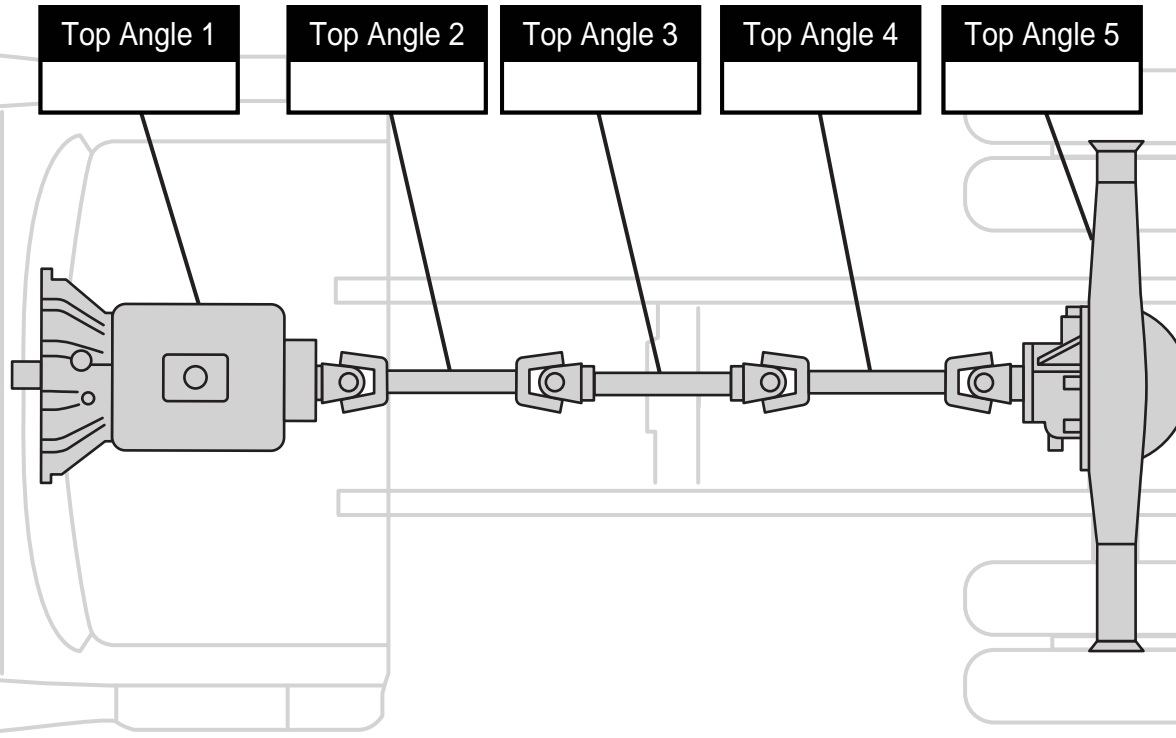
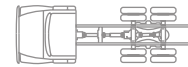
Side Angle 4

Side Angle 5



Print

Exit



Print

Exit

