

(PRINT AND INCLUDE THIS FORM WITH ITEMS)



PO#: _____

RATIO: _____

SERVICE REQUEST

CUSTOMER INFORMATION

Company Name _____ Work Phone (_____) _____

Full Name _____ Cell Phone (_____) _____

Email _____

Billing Address _____
(Address Line 1)

Preferred Method of Contact: ☐ Phone ☐ Text ☐ Email

(Address Line 2) City _____ State _____ Zip _____

→ Ship back to this address? ☐ YES ☐ NO, ship to:

VEHICLE INFORMATION

Year		Make		Model		Trim	
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INSTRUMENT INFORMATION

Brand		Serial #		Type	
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Previously Repaired? ☐ YES, Repaired at : ☐ West Valley Instruments; *Previous PO#*: _____

☐ NO ☐ Other: _____

SERVICE REQUESTED

Testing / Repair / Rebuild / Programming / Odometer / Correction / Upgrade / Ratio Changes / Restoration

Problem / Issue / Repair Request:

Thank you for choosing West Valley Instrument Specialists!



West Valley Instrument Specialists, Inc.
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(818) 758-9500
westvalleyinstruments@gmail.com