

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

Top Gear Ratio  
of Auxiliary  
(required field)

Print

Exit

Comments



Side Angle 1

Side Angle 2

Side Angle 3

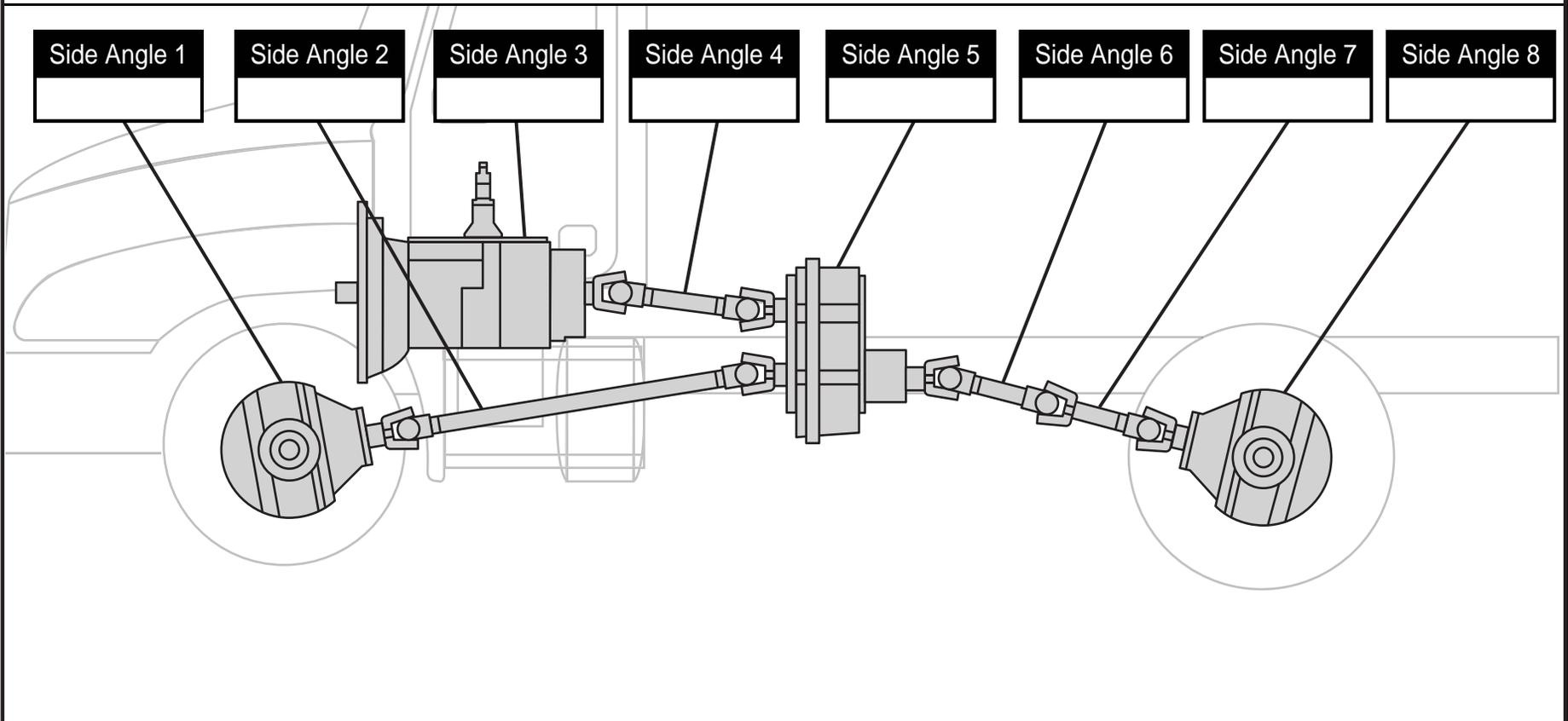
Side Angle 4

Side Angle 5

Side Angle 6

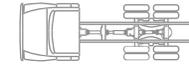
Side Angle 7

Side Angle 8

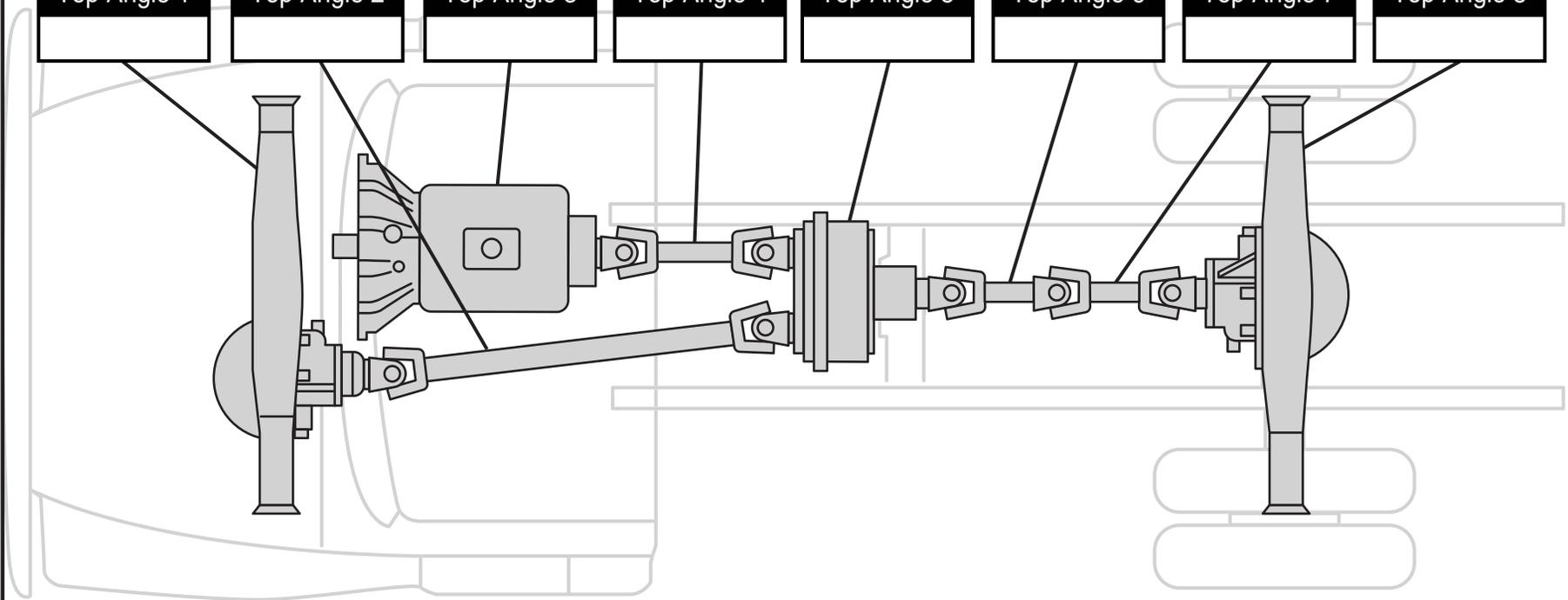


Print

Exit



- Top Angle 1
- Top Angle 2
- Top Angle 3
- Top Angle 4
- Top Angle 5
- Top Angle 6
- Top Angle 7
- Top Angle 8



Print

Exit

