

Fleet Name

Vehicle Mileage

Truck Unit #

Email Address

VIN #  
(required field)

Phone Number

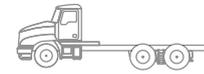
Max Engine RPM  
(required field)

R.O. Number

Top Gear Ratio  
of Transmission  
(required field)

Case Number

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



Side Angle 1

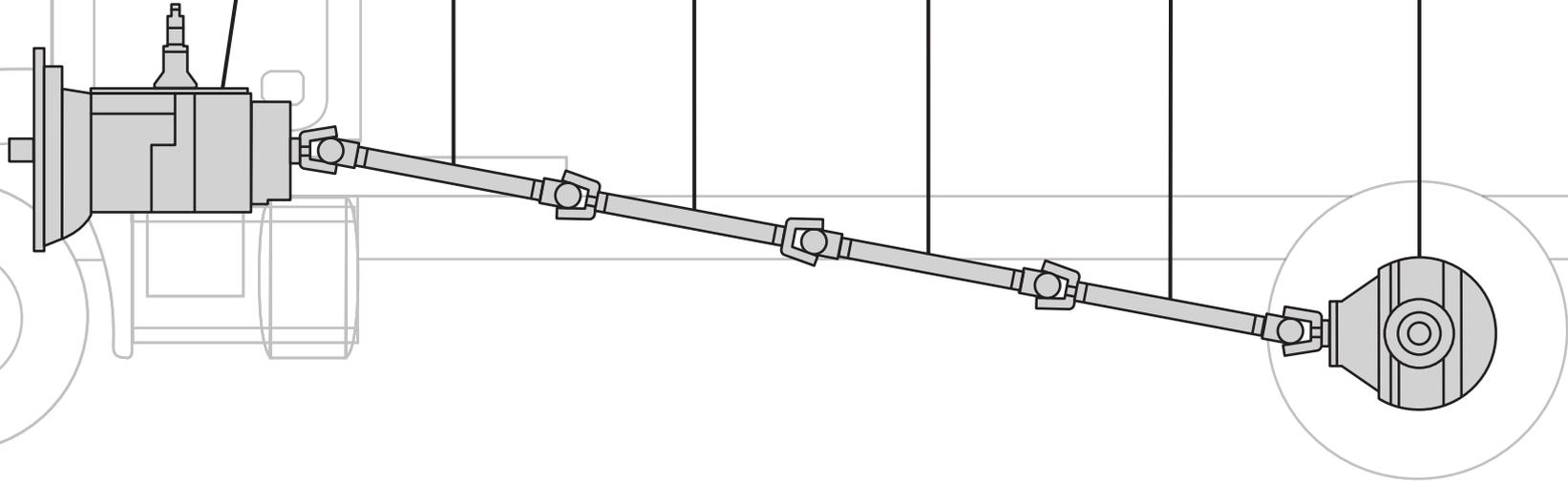
Side Angle 2

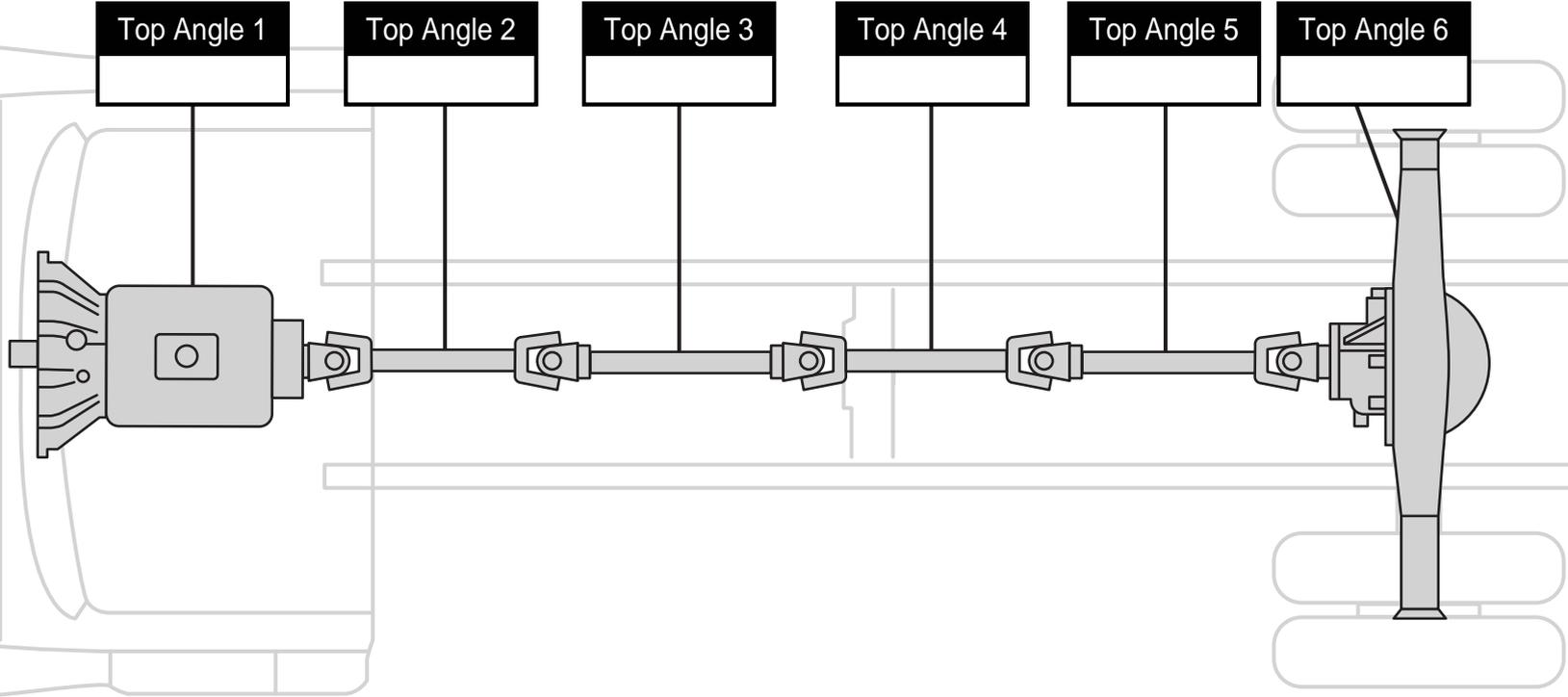
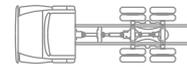
Side Angle 3

Side Angle 4

Side Angle 5

Side Angle 6

[Print](#)[Exit](#)

[Print](#)[Exit](#)

