Sales Person: Phone: Work Order: _____



	DISMAI	NILING 2 2 2 2			
Customer/Shop:			Contact Name:		
Phone: Fax Num		ber or Email:			
Year:	Make:	Model	Production Dat	e:	
VIN:			P.O.#:		
	PASSENGER S	SIDE			
	TOP VIEW		Please use the area below for a detail of	of cut instructions:	
	DRIVER SID	DE DE	Notes:		
P The state of th					
	UNDERBODY				
Please mark the above cut sheet carefully. Body cuts are a special ordered part and are non-refundable,					

Please mark the above cut sheet carefully. Body cuts are a special ordered part and are non-refundable, once the cut is complete the sale is final. By signing below, you are authorizing Mendoza Auto Dismantling to perform the labor required to provide the requested section of the vehicle.

Name_____ Signature____ Date____

Fax back to (661)-833-6648 email fabian@Mendozaauto.com