MID-ISLAND AUTO WRECKERS **QUAD CAB TRUCK FORM** Date: _____ To: Mid -Island Auto Wreckers From: Contact Person: _____ Contact Person: _____ Phone #: Fax #: Make: _____ Model: _____ VIN: PO #: _____ Build Date: _____ NOTE: Credit card orders which have already been processed may not be canceled or returned. No refunds or returns for cut-off body parts or delivered parts. **PASSENGER SIDE** Please use the area below for a detail of cut instructions: **TOP VIEW** Notes: **DRIVER SIDE** Р **TOP VIEW**