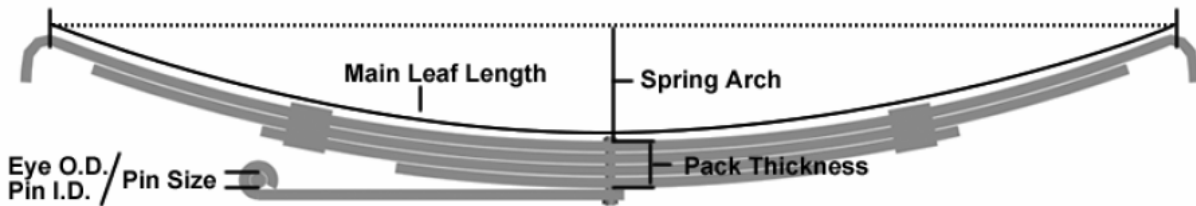
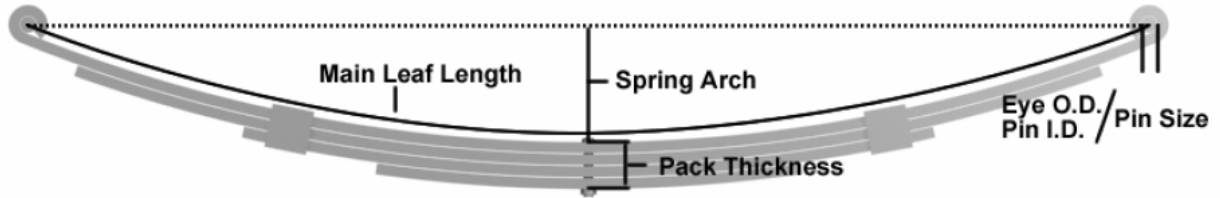


Leaf Spring Order Form



Name _____ Phone Number _____

Vehicle Specifications

Make/Model _____ Year _____

Spring Specifications

- | | |
|--|--|
| 1. Spring Format (Check one) | 5. Spring Arch _____ |
| <input type="checkbox"/> Tapered/Parabolic | 6. Number of leaves in the spring assembly _____ |
| <input type="checkbox"/> Multi-leaf | 7. Do the leaf sizes vary? (check one) |
| 2. Main Leaf Length _____ | <input type="checkbox"/> Yes |
| 3. Spring Width _____ | <input type="checkbox"/> No |
| 4. Pack Thickness _____ | 8. Inside Diameter / Pin Size _____ |

Quantity Required: _____

Fill out this form and fax it to us at (780) 461-3460