

## PICKUP TRUCK INFORMATION SHEET

Company name \_\_\_\_\_ Account No. \_\_\_\_\_

Address - Street \_\_\_\_\_

City - State - Zip \_\_\_\_\_

Order P.O. number \_\_\_\_\_ Fabric Choice \_\_\_\_\_

Customer name \_\_\_\_\_

### Identification Information

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

Std. Cab  Ext'd Cab  2-Door  3-Door  4-Door

Short Bed  Long Bed  If unsure, bed length in inches \_\_\_\_\_

Standard Rear Wheels  Dual Rear Wheels (Dually)

### Aftermarket Accessories

**NOTE** - A photo and sketch must be sent with dimensions noted for any of these accessories. The photo will be returned if requested. This information is required to insure the best fit possible.

Grille Guard <input type="checkbox"/>	Sun Visor <input type="checkbox"/>
Push Bar <input type="checkbox"/>	Shell or Cap on Bed <input type="checkbox"/>
Winch on Front Bumper <input type="checkbox"/>	Roll Bar / Light Bar <input type="checkbox"/>
Bug Deflector on Hood <input type="checkbox"/>	Spare Tire in Bed <input type="checkbox"/>
Tool Box in Bed <input type="checkbox"/>	Height above side of bed (inches) _____
	Back of cab to rear edge of tool box (inches) _____
Rails on Bed <input type="checkbox"/>	Height above side of bed (inches) _____
Light Bar on Roof <input type="checkbox"/>	Need photo and dimensions noted above
Running Boards / Steps <input type="checkbox"/>	Extending how far below factory body (inches) _____
Other features not listed <input type="checkbox"/>	Describe in detail and include photo(s) and dimensions

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DIMS 119A (12/99)

**TJ CARS**

**SEND TO:** email: [info@go-ab.com](mailto:info@go-ab.com) or fax: (530) 589-2510

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